

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Black PAC

ADDRESS (number and street)

2090 Adam Clayton Powell Jr. Blvd.



Suite 201A



Check if different than previously reported. (ACC)

New York

NY

10027

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00609388

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Shropshire, Adrienne, R., ,

Type or Print Name of Treasurer

Signature of Treasurer

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Black PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		15		2020

To:

M M	/	D D	/	Y Y Y Y Y
11		23		2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2020</td></tr></table>	Y	Y	Y	Y	Y	2020						<table><tr><td colspan="5">238460.47</td></tr></table>	238460.47				
Y	Y	Y	Y	Y													
2020																	
238460.47																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">11471908.36</td></tr></table>	11471908.36															
11471908.36																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">12635447.58</td></tr></table>	12635447.58					<table><tr><td colspan="5">35391471.02</td></tr></table>	35391471.02									
12635447.58																	
35391471.02																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">24107355.94</td></tr></table>	24107355.94					<table><tr><td colspan="5">35629931.49</td></tr></table>	35629931.49									
24107355.94																	
35629931.49																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">20614482.47</td></tr></table>	20614482.47					<table><tr><td colspan="5">32137058.02</td></tr></table>	32137058.02									
20614482.47																	
32137058.02																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">3492873.47</td></tr></table>	3492873.47					<table><tr><td colspan="5">3492873.47</td></tr></table>	3492873.47									
3492873.47																	
3492873.47																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">21000.00</td></tr></table>	21000.00															
21000.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**Black PAC**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	0

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	2	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	5881795.00	20946847.96
(ii) Unitemized .....	6756.73	45301.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5888551.73	20992148.98
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	4340000.00	10067050.56
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	10228551.73	31059199.54
12. Transfers From Affiliated/Other Party Committees.....	19955.35	154955.35
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	2386940.50	4137797.50
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	39518.63
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	12635447.58	35391471.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	12635447.58	35391471.02

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6336406.47	8100898.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6336406.47	8100898.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	80000.00
24. Independent Expenditures (use Schedule E) .....	14223318.48	23306361.41
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	400.00	437.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	400.00	437.00
29. Other Disbursements (Including Non-Federal Donations).....	54357.52	649360.92
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20614482.47	32137058.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20614482.47	32137058.02

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	10228551.73	31059199.54
34. Total Contribution Refunds (from Line 28(d)) .....	400.00	437.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10228151.73	31058762.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6336406.47	8100898.69
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2386940.50	4137797.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3949465.97	3963101.19

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 155

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### A. America Votes

Mailing Address 1155 Connecticut Ave NW  
Ste 600

City  
Washington

State  
DC

Zip Code  
20036-4324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5828200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2020

Transaction ID : VTEF810ZPVY8

Amount of Each Receipt this Period

386200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### B. America Votes

Mailing Address 1155 Connecticut Ave NW  
Ste 600

City  
Washington

State  
DC

Zip Code  
20036-4324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6528200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2020

Transaction ID : VTEF81080GS4

Amount of Each Receipt this Period

700000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### C. America Votes

Mailing Address 1155 Connecticut Ave NW  
Ste 600

City  
Washington

State  
DC

Zip Code  
20036-4324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8728200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2020

Transaction ID : VTEF810ZPW29

Amount of Each Receipt this Period

2200000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3286200.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. America Votes**

Mailing Address 1155 Connecticut Ave NW  
Ste 600

City  
Washington

State  
DC

Zip Code  
20036-4324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9258200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 23 / 2020

Transaction ID : VTEF810ZPW37

Amount of Each Receipt this Period

530000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. America Votes**

Mailing Address 1155 Connecticut Ave NW  
Ste 600

City  
Washington

State  
DC

Zip Code  
20036-4324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9758200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 16 / 2020

Transaction ID : VTEF810VB242

Amount of Each Receipt this Period

500000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. American Federation of Teachers AFL-CIO AFT Solidarity 527**

Mailing Address 555 New Jersey Ave NW

City  
Washington

State  
DC

Zip Code  
20001-2029

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2020

Transaction ID : VTEF810FAVD5

Amount of Each Receipt this Period

150000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1180000.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Arnold, Stephanie, , ,**

Mailing Address 2634 SW Mitchell St

City  
Portland

State  
OR

Zip Code  
97239-2166

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Lewis & Clark College

Occupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

155.00

Date of Receipt

11 / 04 / 2020

Transaction ID : VTEF810V3DV7

Amount of Each Receipt this Period

10.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

11 / 09 / 2020

Transaction ID : VTEF810V3DV7E

Amount of Each Receipt this Period

10.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Arnold, Stephanie, , ,**

Mailing Address 2634 SW Mitchell St

City

Portland

State  
OR

Zip Code  
97239-2166

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Lewis & Clark College

Occupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

11 / 09 / 2020

Transaction ID : VTEF810ZHF31

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

**11** / **16** / **2020**

**Transaction ID : VTEF810ZHF31E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Beman, Ann, , ,**

Mailing Address 141 Tobias St. Box 681

City  
Kernville

State  
CA

Zip Code  
93238

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10** / **27** / **2020**

**Transaction ID : VTEF810V3HA2**

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

**11** / **02** / **2020**

**Transaction ID : VTEF810V3HA2E**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Bloom, Allan, , ,**

Mailing Address 201 Transylvania Ave

City  
Raleigh

State  
NC

Zip Code  
27609-6317

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 04 / 2020

Transaction ID : VTEF810V3FN3

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

11 / 09 / 2020

Transaction ID : VTEF810V3FN3E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Bloomberg, Michael, R., ,**

Mailing Address 909 3rd Ave

City

New York

State

NY

Zip Code

10022-4731

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Bloomberg Inc.

Occupation (for Individual)

Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7370000.00

Date of Receipt

10 / 30 / 2020

Transaction ID : VTEF810ZPW45

Amount of Each Receipt this Period

450000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Bloomberg, Michael, R., ,**

Mailing Address 909 3rd Ave

City  
New York

State  
NY

Zip Code  
10022-4731

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Bloomberg Inc.

Occupation (for Individual)

Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7370000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2020

Transaction ID : VTEF810ZPW53

Amount of Each Receipt this Period

600000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Bradshaw, Melissa, , ,**

Mailing Address 8908 Battery Rd

City  
Alexandria

State  
VA

Zip Code  
22308-2804

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HJF Inc.

Occupation (for Individual)

Program Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2020

Transaction ID : VTEF810V3E71

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2020

Transaction ID : VTEF810V3E71E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶

600050.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Burke, Barbara, , ,

Mailing Address 214 University Ave

City  
IthacaState  
NYZip Code  
14850-3818FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Publisher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 09 / 2020

Transaction ID : VTEF810ZHDC8

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2020

Transaction ID : VTEF810ZHDC8E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Burns, Heather, , ,

Mailing Address 9853 61st Ave S

City

Seattle

State

WA

Zip Code

98118-5826

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

City of Seattle

Occupation (for Individual)

Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 16 / 2020

Transaction ID : VTEF810JJA20

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶

75.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2020

**Transaction ID : VTEF810JJA20E**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Burns, Heather, , ,**

Mailing Address 9853 61st Ave S

City

Seattle

State

WA

Zip Code

98118-5826

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
City of Seattle

Occupation (for Individual)

Finance

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2020

**Transaction ID : VTEF810ZHE88**

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 23 / 2020

**Transaction ID : VTEF810ZHE88E**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

25.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 155

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Cofrin, Gladys, G., ,**

Mailing Address 14720 NW 13th Pl

City  
Newberry

State  
FL

Zip Code  
32669-2807

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Wagmore Foundation, Inc.

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 16 / 2020

**Transaction ID : VTEF81080GR6**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Cofrin, Gladys, G., ,**

Mailing Address 14720 NW 13th Pl

City  
Newberry

State  
FL

Zip Code  
32669-2807

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Wagmore Foundation, Inc.

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 29 / 2020

**Transaction ID : VTEF810ZPW95**

Amount of Each Receipt this Period

150000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**c. Dignity CA SEIU Local 2015**

Mailing Address 555 Capitol Mall  
Ste 1425

City  
Sacramento

State  
CA

Zip Code  
95814-4602

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2020

**Transaction ID : VTEF810ZPWB0**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

275000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Flynn, Sharon, , ,

Mailing Address 1321 Upland Dr  
# 3128City  
HoustonState  
TXZip Code  
77043-4718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OceanaGold CorporationOccupation (for Individual)  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 09 / 2020

Transaction ID : VTEF810ZHF07

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2020

Transaction ID : VTEF810ZHF07E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gibson, David, H, ,

Mailing Address 3511 Overbrook Dr

City

Dallas

State

TX

Zip Code

75205-4324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Investor & Photographer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 16 / 2020

Transaction ID : VTEF810JJCB7

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 155

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

**C**

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2020

**Transaction ID : VTEF810JCB7E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Gibson, David, H, ,**

Mailing Address 3511 Overbrook Dr

City

Dallas

State

TX

Zip Code

75205-4324

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)

Investor & Photographer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2020

**Transaction ID : VTEF810ZHE62**

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

**C**

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 23 / 2020

**Transaction ID : VTEF810ZHE62E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Higher Heights Political Fund**

Mailing Address 1835 California St NW

Apt D

City

Washington

State

DC

Zip Code

20009-1876

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2020

Transaction ID : VTEF810VQ2Z0

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Howard, Trish, , ,**

Mailing Address 10930 SW 238th St

City

Vashon

State

WA

Zip Code

98070-7606

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Carpenter

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 18 / 2020

Transaction ID : VTEF810ZHD53

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 23 / 2020

Transaction ID : VTEF810ZHD53E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Howard, Trish, , ,**

Mailing Address 10930 SW 238th St

City  
Vashon

State  
WA

Zip Code  
98070-7606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Carpenter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**11** / **20** / **2020**

**Transaction ID : VTEF810ZHD79**

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

**11** / **23** / **2020**

**Transaction ID : VTEF810ZHD79E**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Hubbard, Francis, , ,**

Mailing Address 5 North Rd

City

Berkeley Heights

State

NJ

Zip Code

07922-2300

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**10** / **23** / **2020**

**Transaction ID : VTEF810JJ9B0**

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2020

Transaction ID : VTEF810JJ9B0E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this  
organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Jackson, Kate, , ,**

Mailing Address 359 Kearney St

City

Ashland

State

OR

Zip Code

97520-3037

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Oregon DEQ

Occupation (for Individual)

Regional Liaison

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2020

Transaction ID : VTEF810JJCA9

Amount of Each Receipt this Period

75.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2020

Transaction ID : VTEF810JJCA9E

Amount of Each Receipt this Period

75.00

☒ Memo Item

Note: Above Contribution earmarked through this  
organization.

SUBTOTAL of Receipts This Page (optional).....▶

75.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Jackson, Kate, , ,**

Mailing Address 359 Kearney St

City  
Ashland

State  
OR

Zip Code  
97520-3037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Oregon DEQ

Occupation (for Individual)  
Regional Liaison

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**11 / 17 / 2020**

**Transaction ID : VTEF810ZHDZ8**

Amount of Each Receipt this Period

75.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

**11 / 23 / 2020**

**Transaction ID : VTEF810ZHDZ8E**

Amount of Each Receipt this Period

75.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Jacobs, Joshua, , ,**

Mailing Address 1392 Beacon St

City

Waban

State  
MA

Zip Code  
02468-1603

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Massachusetts Institute of Technology

Occupation (for Individual)  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**11 / 08 / 2020**

**Transaction ID : VTEF810V3FP1**

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2020

Transaction ID : VTEF810V3FP1E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this  
organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Jurvetson, Karla, , ,**Mailing Address 350 2nd St  
Ste 4

City

Los Altos

State

CA

Zip Code

94022-3602

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)

Physician

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 22 / 2020

Transaction ID : VTEF810ZHDA3

Amount of Each Receipt this Period

10000.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2020

Transaction ID : VTEF810ZHDA3E

Amount of Each Receipt this Period

10000.00

☒ Memo Item

Note: Above Contribution earmarked through this  
organization.

SUBTOTAL of Receipts This Page (optional).....▶

10000.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Katrishen, Frances, , ,

Mailing Address 22215 Osprey Way

City

West Windsor

State

NJ

Zip Code

08550-5468

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 12 / 2020

Transaction ID : VTEF810JJ9Q5

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2020

Transaction ID : VTEF810JJ9Q5E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Keller, Tom, , ,

Mailing Address 3128 NW Verde Vista Ter

City

Portland

State

OR

Zip Code

97210-3366

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Portland State University

Occupation (for Individual)

Professor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2020

Transaction ID : VTEF810V3E97

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 02 / 2020

Transaction ID : VTEF810V3E97E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Kellner, Peter, , ,**

Mailing Address 39 Quidnet Rd

City

Nantucket

State

MA

Zip Code

02554-2404

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2020

Transaction ID : VTEF810JJBG3

Amount of Each Receipt this Period

50000.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2020

Transaction ID : VTEF810JJBG3E

Amount of Each Receipt this Period

50000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶

50000.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kingston, James, , ,

Mailing Address 690 Elmgrove Ave

City  
ProvidenceState  
RIZip Code  
02906-4920FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 18 / 2020

Transaction ID : VTEF810JJA54

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2020

Transaction ID : VTEF810JJA54E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kingston, James, , ,

Mailing Address 690 Elmgrove Ave

City  
ProvidenceState  
RIZip Code  
02906-4920FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2020

Transaction ID : VTEF810ZHD29

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶

125.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 23 / 2020

Transaction ID : VTEF810ZHD29E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this  
organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Kingston, James, , ,**

Mailing Address 690 Elmgrove Ave

City  
Providence

State  
RI

Zip Code  
02906-4920

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 18 / 2020

Transaction ID : VTEF810ZHFB4

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 23 / 2020

Transaction ID : VTEF810ZHFB4E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this  
organization.

SUBTOTAL of Receipts This Page (optional).....▶

25.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 OF 155

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Lacey, Frederick, B, , Jr**

Mailing Address 1083 N Collier Blvd  
# 389

City  
Marco Island

State  
FL

Zip Code  
34145-2539

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2020

**Transaction ID : VTEF810JJ9G0**

Amount of Each Receipt this Period

500.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2020

**Transaction ID : VTEF810JJ9G0E**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Lacey, Frederick, B, , Jr**

Mailing Address 1083 N Collier Blvd  
# 389

City

Marco Island

State

FL

Zip Code

34145-2539

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2020

**Transaction ID : VTEF810JJ9H8**

Amount of Each Receipt this Period

500.00

☐ Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2020

Transaction ID : VTEF810JJ9H8E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Lacey, Frederick, B, , Jr**Mailing Address 1083 N Collier Blvd  
# 389City  
Marco IslandState  
FLZip Code  
34145-2539FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2020

Transaction ID : VTEF810JJ9J6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2020

Transaction ID : VTEF810JJ9J6E

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 155

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Lerner, Coby, , ,**Mailing Address 150 W 12th St  
Apt 11WCity  
New YorkState  
NYZip Code  
10011-8299FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Brightspot Strategy

Occupation (for Individual)

Strategy Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2020

Transaction ID : VTEF810JJ9N9

Amount of Each Receipt this Period

500.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2020

Transaction ID : VTEF810JJ9N9E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Levine, Jennifer, , ,**

Mailing Address 1587 27th Ave

City

San Francisco

State

CA

Zip Code

94122-3227

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

San Francisco Unified School District

Occupation (for Individual)

Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2020

Transaction ID : VTEF810V3FS4

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶

550.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 155

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

11 / 09 / 2020

**Transaction ID : VTEF810V3FS4E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Libert, Adrian, , ,**

Mailing Address 1 Crestwood Blvd

City

Poughkeepsie

State

NY

Zip Code

12603-1207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)

Cybersecurity

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 24 / 2020

**Transaction ID : VTEF810JJ953**

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

10 / 26 / 2020

**Transaction ID : VTEF810JJ953E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 30 OF 155

(check only one)

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mardenborough, Leslie, , ,

Mailing Address 256 Hamilton Ave

City  
New RochelleState  
NYZip Code  
10801-2820FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 10 / 2020

Transaction ID : VTEF810ZHEZ9

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2020

Transaction ID : VTEF810ZHEZ9E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McClain, John, , ,

Mailing Address 7 Frost Rd

City  
LexingtonState  
MAZip Code  
02420-1927FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Oracle CorporationOccupation (for Individual)  
Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 07 / 2020

Transaction ID : VTEF810V3EN0

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

**11** / **09** / **2020**

**Transaction ID : VTEF810V3EN0E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Moore, Faryce, , ,**

Mailing Address 1351 Dean St  
FI 2

City  
Brooklyn

State  
NY

Zip Code  
11216-3403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
U.S. House of Representatives

Occupation (for Individual)  
Contract Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**11** / **02** / **2020**

**Transaction ID : VTEF810V3EZ9**

Amount of Each Receipt this Period

10.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

**11** / **04** / **2020**

**Transaction ID : VTEF810V3EZ9E**

Amount of Each Receipt this Period

10.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Moore, Faryce, , ,**

Mailing Address 1351 Dean St  
Fl 2

City  
Brooklyn

State  
NY

Zip Code  
11216-3403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
U.S. House of Representatives

Occupation (for Individual)  
Contract Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY  
11 / 07 / 2020

**Transaction ID : VTEF810V3FH1**

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

MM / DD / YYYY  
11 / 09 / 2020

**Transaction ID : VTEF810V3FH1E**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Morrell, Steve, , ,**

Mailing Address 41 Middlecroft Rd

City

Burlington

State

CT

Zip Code

06013-1621

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
11 / 18 / 2020

**Transaction ID : VTEF810ZHD61**

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

275.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### A. ActBlue

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

**11** / **23** / **2020**

**Transaction ID : VTEF810ZHD61E**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### B. Musher, Rafi, , ,

Mailing Address 9 Montague Ter  
Apt 1

City  
Brooklyn

State  
NY

Zip Code  
11201-4192

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Stax

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**10** / **17** / **2020**

**Transaction ID : VTEF810JJ9X0**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### C. ActBlue

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

**10** / **19** / **2020**

**Transaction ID : VTEF810JJ9X0E**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Nettleton, Jilda, , ,**

Mailing Address 211 239th St SE

City  
Bothell

State  
WA

Zip Code  
98021-4503

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**10 / 25 / 2020**

**Transaction ID : VTEF810JJB56**

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

**10 / 26 / 2020**

**Transaction ID : VTEF810JJB56E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Nettleton, Jilda, , ,**

Mailing Address 211 239th St SE

City

Bothell

State

WA

Zip Code

98021-4503

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**10 / 29 / 2020**

**Transaction ID : VTEF810V3ED7**

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 02 / 2020

Transaction ID : VTEF810V3ED7E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Pacheco, Alexander, , ,**

Mailing Address 2140 Hyde St

City  
San FranciscoState  
CAZip Code  
94109-1704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IBEW Local 6Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 11 / 2020

Transaction ID : VTEF810ZHE95

Amount of Each Receipt this Period

20.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2020

Transaction ID : VTEF810ZHE95E

Amount of Each Receipt this Period

20.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶

20.00

TOTAL This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Porter, Jay, , ,

Mailing Address 1043 La Quinta Ct

City  
NapaState  
CAZip Code  
94559-3522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Revere

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 08 / 2020

Transaction ID : VTEF810V3FR7

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 09 / 2020

Transaction ID : VTEF810V3FR7E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pressey, Walter, , ,

Mailing Address 38 Lawrence Ln

City

Belmont

State

MA

Zip Code

02478-3334

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 21 / 2020

Transaction ID : VTEF810ZHD87

Amount of Each Receipt this Period

500.00

☐ Memo Item

\* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶

550.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
11 / 23 / 2020

**Transaction ID : VTEF810ZHD87E**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Racine, John, , ,**

Mailing Address 3 Jefferson St  
Apt 1

City  
Cambridge

State  
MA

Zip Code  
02141-1063

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Behavioral Concepts Innovation LLC

Occupation (for Individual)  
Behavior Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
10 / 31 / 2020

**Transaction ID : VTEF810V3FF5**

Amount of Each Receipt this Period

5.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
11 / 02 / 2020

**Transaction ID : VTEF810V3FF5E**

Amount of Each Receipt this Period

5.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Racine, John, , ,**

Mailing Address 3 Jefferson St

Apt 1

City

Cambridge

State

MA

Zip Code

02141-1063

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Behavioral Concepts Innovation LLC

Occupation (for Individual)

Behavior Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

11 / 08 / 2020

Transaction ID : VTEF810V3GA9

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

11 / 09 / 2020

Transaction ID : VTEF810V3GA9E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Reynolds, William, , ,**

Mailing Address 1404 K St SE

Apt 2

City

Washington

State

DC

Zip Code

20003-3225

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Civix Strategy Group

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

725.00

Date of Receipt

11 / 01 / 2020

Transaction ID : VTEF810V3H94

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2020

Transaction ID : VTEF810V3H94E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Scripps, Sebastian, , ,**

Mailing Address 85 Rosebrook Rd

City

New Canaan

State

CT

Zip Code

06840-3722

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 14 / 2020

Transaction ID : VTEF810ZHEX3

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2020

Transaction ID : VTEF810ZHEX3E

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶

1000.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Silberman, Claire, , ,**

Mailing Address 360 Furman St  
Apt 1216

City  
Brooklyn

State  
NY

Zip Code  
11201-4579

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 30 / 2020

**Transaction ID : VTEF810V3HB9**

Amount of Each Receipt this Period

500.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 02 / 2020

**Transaction ID : VTEF810V3HB9E**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Starr, Jane, , ,**

Mailing Address 12016 SW Cedarhurst Rd

City

Vashon

State

WA

Zip Code

98070-3514

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2020

**Transaction ID : VTEF810JJ9P7**

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2020

Transaction ID : VTEF810JJ9P7E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Starr, Jane, , ,**

Mailing Address 12016 SW Cedarhurst Rd

City  
VashonState  
WAZip Code  
98070-3514FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 14 / 2020

Transaction ID : VTEF810ZHF15

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2020

Transaction ID : VTEF810ZHF15E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

100.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Steingruebl, Andrew, , ,

Mailing Address 1526 Martin Ave

City  
San JoseState  
CAZip Code  
95126-2517FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Pinterest

Occupation (for Individual)

Computer Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2020

Transaction ID : VTEF810JJ9K3

Amount of Each Receipt this Period

20000.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2020

Transaction ID : VTEF810JJ9K3E

Amount of Each Receipt this Period

20000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stopper, Lawrence, , ,

Mailing Address 262 Mount Ararat HI

City

Afton

State

VA

Zip Code

22920-2930

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2020

Transaction ID : VTEF810JJC75

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

20025.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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for each category of the  
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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2020

Transaction ID : VTEF810JJC75E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Stott, Anne, , ,**

Mailing Address PO Box 160

City

Provincetown

State

MA

Zip Code

02657-0160

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)

Writer &amp; Performer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2020

Transaction ID : VTEF810JJA87

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2020

Transaction ID : VTEF810JJA87E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶

25.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stott, Anne, , ,**

Mailing Address PO Box 160

City  
Provincetown

State  
MA

Zip Code  
02657-0160

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Writer & Performer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**11** / **17** / **2020**

**Transaction ID : VTEF810ZHFC2**

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ActBlue**

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

**11** / **23** / **2020**

**Transaction ID : VTEF810ZHFC2E**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sussman, William, , ,**

Mailing Address 240 W 75th St  
Apt 8A

City  
New York

State  
NY

Zip Code  
10023-1725

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

**10** / **23** / **2020**

**Transaction ID : VTEF810JJ987**

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2020

Transaction ID : VTEF810JJ987E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Thoren, John, , ,**

Mailing Address 2106 31st Ave SE

City  
PuyallupState  
WAZip Code  
98374-1455FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Computer Networking

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2020

Transaction ID : VTEF810V3H78

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2020

Transaction ID : VTEF810V3H78E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

25.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 46 OF 155

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ware, Harlan, , ,**

Mailing Address 101 Wilders Woods Grove Ln

City  
Clayton

State  
NC

Zip Code  
27527-9809

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CBTS

Occupation (for Individual)  
Network Security Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10 / 20 / 2020**

**Transaction ID : VTEF810JJC83**

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

**10 / 26 / 2020**

**Transaction ID : VTEF810JJC83E**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Ware, Harlan, , ,**

Mailing Address 101 Wilders Woods Grove Ln

City

Clayton

State

NC

Zip Code

27527-9809

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CBTS

Occupation (for Individual)  
Network Security Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**11 / 20 / 2020**

**Transaction ID : VTEF810ZHF98**

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ►

50.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 23 / 2020

**Transaction ID : VTEF810ZHF98E**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Waterhouse, Paul, , ,**

Mailing Address 3515 N Damen Ave

City

Chicago

State

IL

Zip Code

60618-6107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 19 / 2020

**Transaction ID : VTEF810ZHD95**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 23 / 2020

**Transaction ID : VTEF810ZHD95E**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Weltman, Susan, , ,**

Mailing Address 71 Carroll St

City  
Brooklyn

State  
NY

Zip Code  
11231-2767

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 23 / 2020

**Transaction ID : VTEF810JJ9F2**

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2020

**Transaction ID : VTEF810JJ9F2E**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wheeler, Rosemary, , ,**

Mailing Address 900 Shore Pine Ct

City

Fort Collins

State

CO

Zip Code

80525-4887

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2020

**Transaction ID : VTEF810V3F31**

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

275.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### A. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

11 / 04 / 2020

Transaction ID : VTEF810V3F31E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### B. Williams, Leah, , ,

Mailing Address 30 Mount Pleasant St

City

Cambridge

State

MA

Zip Code

02140-2614

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Aerodyne Research Inc.

Occupation (for Individual)  
Scientist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 15 / 2020

Transaction ID : VTEF810ZHEY1

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### C. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

96851.73

Date of Receipt

11 / 16 / 2020

Transaction ID : VTEF810ZHEY1E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

250.00

5881795.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Communications Workers of America-COPE Political Contributions Committee**

Mailing Address 501 3rd St NW

City  
Washington

State  
DC

Zip Code  
20001-2760

FEC ID number of contributing  
federal political committee.

**C** C00002089

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

**11 / 05 / 2020**

**Transaction ID : VTEF810VNME9**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Fair Fight**

Mailing Address 1270 Caroline St NE  
Ste D120-311

City  
Atlanta

State  
GA

Zip Code  
30307-2758

FEC ID number of contributing  
federal political committee.

**C** C00693515

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500000.00

Date of Receipt

**11 / 18 / 2020**

**Transaction ID : VTEF810VNP46**

Amount of Each Receipt this Period

2500000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Fair Share Action**

Mailing Address 294 Washington St  
Ste 500

City  
Boston

State  
MA

Zip Code  
02108-4612

FEC ID number of contributing  
federal political committee.

**C** C00526673

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

**10 / 27 / 2020**

**Transaction ID : VTEF810ZPWA3**

Amount of Each Receipt this Period

50000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2560000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Family Friendly Action PAC**

Mailing Address 114 N Main St  
Ste 203

City  
Concord

State  
NH

Zip Code  
03301-4953

FEC ID number of contributing  
federal political committee.

C C00744920

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 03 / 2020

Transaction ID : VTEF810ZPW61

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FF PAC**

Mailing Address 611 Pennsylvania Ave SE  
# 143

City  
Washington

State  
DC

Zip Code  
20003-4303

FEC ID number of contributing  
federal political committee.

C C00669259

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 22 / 2020

Transaction ID : VTEF810ZPW11

Amount of Each Receipt this Period

450000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Florida Freedom PAC**

Mailing Address 10800 Biscayne Blvd  
Ste 1050

City  
Miami

State  
FL

Zip Code  
33161-7566

FEC ID number of contributing  
federal political committee.

C C00521013

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 16 / 2020

Transaction ID : VTEF81080E86

Amount of Each Receipt this Period

15000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

565000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. LCV Victory Fund**

Mailing Address 740 15th St NW

FI 7

City

Washington

State

DC

Zip Code

20005-1048

FEC ID number of contributing  
federal political committee.

**C**

C00486845

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 20 / 2020

**Transaction ID : VTEF810VQ2D0**

Amount of Each Receipt this Period

150000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. SEIU COPE**

Mailing Address 1800 Massachusetts Ave NW

City

Washington

State

DC

Zip Code

20036-1806

FEC ID number of contributing  
federal political committee.

**C**

C00004036

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

915000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2020

**Transaction ID : VTEF8109Y9H4**

Amount of Each Receipt this Period

815000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. United We Can**

Mailing Address 1800 Massachusetts Ave NW

City

Washington

State

DC

Zip Code

20036-1222

FEC ID number of contributing  
federal political committee.

**C**

C00523621

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2020

**Transaction ID : VTEF810KRJR0**

Amount of Each Receipt this Period

250000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

1215000.00

**TOTAL** This Period (last page this line number only)..... ►

4340000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
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NAME OF COMMITTEE (In Full)

**Black PAC**

## **A. BlackPAC and EMILY's List Women Vote! Joint Fundraising Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1800 M St NW  
Ste 375N

City  
Washington

State  
DC

Zip Code  
20036-5862

FEC ID number of contributing  
federal political committee.

**C** C00753301

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142400.00

Date of Receipt

**10** / **30** / **2020**

**Transaction ID : VTEF810KT669**

Amount of Each Receipt this Period

7400.00

☐ Memo Item

## **B. Cofrin, Edith, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1074 Berkshire Rd NE

City  
Atlanta

State  
GA

Zip Code  
30306-3002

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**10** / **15** / **2020**

**Transaction ID : VTEF810KT677**

Amount of Each Receipt this Period

500.00

☒ Memo Item

## **C. BlackPAC and EMILY's List Women Vote! Joint Fundraising Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1800 M St NW  
Ste 375N

City  
Washington

State  
DC

Zip Code  
20036-5862

FEC ID number of contributing  
federal political committee.

**C** C00753301

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

154900.00

Date of Receipt

**11** / **05** / **2020**

**Transaction ID : VTEF810V0G24**

Amount of Each Receipt this Period

12500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

19900.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ballmer, Connie, , ,**

Mailing Address 3832 Hunts Point Rd

City  
Hunts Point

State  
WA

Zip Code  
98004-1110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Ballmer Group

Occupation (for Individual)

Co-Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

**10 / 30 / 2020**

**Transaction ID : VTEF810VG32**

Amount of Each Receipt this Period

12500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BlackPAC and EMILY's List Women Vote! Joint Fundraising Committee**

Mailing Address 1800 M St NW  
Ste 375N

City  
Washington

State  
DC

Zip Code  
20036-5862

FEC ID number of contributing  
federal political committee.

**C** C00753301

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

154955.35

Date of Receipt

**11 / 13 / 2020**

**Transaction ID : VTEF810VNNW3**

Amount of Each Receipt this Period

55.35

☐ Memo Item

Final Transfer

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

55.35

19955.35

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 155

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GBI Strategies LLC**

Mailing Address 5809 Fifer Dr

City  
AlexandriaState  
VAZip Code  
22303-1916FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242132.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		12		2020

Transaction ID : VTEF810VATT0

Amount of Each Receipt this Period

242132.50

☐ Memo Item

Refund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OTG Strategies**

Mailing Address PO Box 69338

City  
Saint LouisState  
MOZip Code  
63169-0338FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2020

Transaction ID : VTEF810ZPH00

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Refund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Priorities USA Action**Mailing Address 1030 15th St NW  
Ste 950 WestCity  
WashingtonState  
DCZip Code  
20005-1503FEC ID number of contributing  
federal political committee.

C C00495861

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2575286.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2020

Transaction ID : VTEF810ZPVZ6

Amount of Each Receipt this Period

824429.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1166561.50

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Priorities USA Action**

Mailing Address 1030 15th St NW  
Ste 950 West

City  
Washington

State  
DC

Zip Code  
20005-1503

FEC ID number of contributing  
federal political committee.

**C** C00495861

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3486915.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
**10 / 22 / 2020**

**Transaction ID : VTEF810ZPW04**

Amount of Each Receipt this Period

911629.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Priorities USA Action**

Mailing Address 1030 15th St NW  
Ste 950 West

City  
Washington

State  
DC

Zip Code  
20005-1503

FEC ID number of contributing  
federal political committee.

**C** C00495861

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3795665.00

Date of Receipt

**M M / D D / Y Y Y Y Y Y**  
**10 / 29 / 2020**

**Transaction ID : VTEF810ZPW87**

Amount of Each Receipt this Period

308750.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

**M M / D D / Y Y Y Y Y Y**

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

1220379.00

**TOTAL** This Period (last page this line number only)..... ►

2386940.50



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 OF 155

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

## **A. 76 Words**

Mailing Address 926 N St NW  
Rear

City  
Washington

State  
DC

Zip Code  
20001-4485

Purpose of Disbursement  
Media Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 27 / 2020

FEC Identification Number

**C** Transaction ID : VTDG0AF188

Amount of Each Disbursement this Period

56000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. 76 Words**

Mailing Address 926 N St NW  
Rear

City  
Washington

State  
DC

Zip Code  
20001-4485

Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 02 / 2020

FEC Identification Number

**C** Transaction ID : VTDG0AF1AV

Amount of Each Disbursement this Period

110000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. 76 Words**

Mailing Address 926 N St NW  
Rear

City  
Washington

State  
DC

Zip Code  
20001-4485

Purpose of Disbursement  
Media Production

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 02 / 2020

FEC Identification Number

**C** Transaction ID : VTDG0AF1B

Amount of Each Disbursement this Period

39623.91

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

205623.91

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 336 Summer St

City  
SomervilleState  
MAZip Code  
02144-3146Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2020			

FEC Identification Number

**C**

Transaction ID : VTDG0AEVR

Amount of Each Disbursement this Period

2001.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 336 Summer St

City  
SomervilleState  
MAZip Code  
02144-3146Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2020			

FEC Identification Number

**C**

Transaction ID : VTDG0AEWT

Amount of Each Disbursement this Period

92.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 336 Summer St

City  
SomervilleState  
MAZip Code  
02144-3146Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2020			

FEC Identification Number

**C**

Transaction ID : VTDG0AEY9

Amount of Each Disbursement this Period

954.36

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3048.25

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 336 Summer St

City  
SomervilleState  
MAZip Code  
02144-3146Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2020			

FEC Identification Number

**C****Transaction ID : VTDG0AF1C\**

Amount of Each Disbursement this Period

98.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 336 Summer St

City  
SomervilleState  
MAZip Code  
02144-3146Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2020			

FEC Identification Number

**C****Transaction ID : VTDG0AF1CV**

Amount of Each Disbursement this Period

18.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 336 Summer St

City  
SomervilleState  
MAZip Code  
02144-3146Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2020			

FEC Identification Number

**C****Transaction ID : VTDG0AF1C.**

Amount of Each Disbursement this Period

48.73

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

166.15

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 336 Summer St

City  
SomervilleState  
MAZip Code  
02144-3146Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2020			

FEC Identification Number

**C**

Transaction ID : VTDG0AF1C1

Amount of Each Disbursement this Period

88.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 336 Summer St

City  
SomervilleState  
MAZip Code  
02144-3146Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			22			2020			

FEC Identification Number

**C**

Transaction ID : VTDG0AF1C2

Amount of Each Disbursement this Period

523.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank, N. A.**

Mailing Address 1825 K St NW

City  
WashingtonState  
DCZip Code  
20006-1245Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2020			

FEC Identification Number

**C**

Transaction ID : VTDG0AEZV

Amount of Each Disbursement this Period

713.27

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1325.51

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 155

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
1	0		1	6		2	0	2	0		

Mailing Address 200 Vesey St

City  
New YorkState  
NYZip Code  
10285-1000Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                          ☐ Senate  
                          ☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:                  District:

FEC Identification Number

**C** **Transaction ID : VTDG0AEZT**

Amount of Each Disbursement this Period

 391.25☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Action Network**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
1	0		1	6		2	0	2	0		

Mailing Address 1900 L St NW  
Ste 900City  
WashingtonState  
DCZip Code  
20036-5005Purpose of Disbursement  
Email Services

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                          ☐ Senate  
                          ☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:                  District:

FEC Identification Number

**C** **Transaction ID : VTDG0AF0VF**

Amount of Each Disbursement this Period

 41.34☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. American Express**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
1	0		1	6		2	0	2	0		

Mailing Address 200 Vesey St

City  
New YorkState  
NYZip Code  
10285-1000Purpose of Disbursement  
Bank Fees

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                          ☐ Senate  
                          ☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:                  District:

FEC Identification Number

**C** **Transaction ID : VTDG0AF0V**

Amount of Each Disbursement this Period

 75.00☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 391.25

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 62 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. GoGoAir**

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2020

Mailing Address 111 N Canal St

City  
ChicagoState  
ILZip Code  
60606-7218Purpose of Disbursement  
Internet Services

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0AF0V**

Amount of Each Disbursement this Period

29.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Google LLC**

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2020

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain ViewState  
CAZip Code  
94043-1351Purpose of Disbursement  
Website Services

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0AF0V**

Amount of Each Disbursement this Period

69.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Squarespace Inc.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2020

Mailing Address 8 Clarkson St

City  
New YorkState  
NYZip Code  
10014-4301Purpose of Disbursement  
Website Hosting

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0AF0V**

Amount of Each Disbursement this Period

19.08

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 63 OF 155

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

## **A. WP Engine**

Mailing Address 504 Lavaca St  
Ste 1000

City  
Austin

State  
TX

Zip Code  
78701-2857

Purpose of Disbursement  
Website Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2020

FEC Identification Number

**C** [Redacted]

**Transaction ID : VTDG0AF0V5**

Amount of Each Disbursement this Period

[Redacted] 115.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. WP Engine**

Mailing Address 504 Lavaca St  
Ste 1000

City  
Austin

State  
TX

Zip Code  
78701-2857

Purpose of Disbursement  
Website Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2020

FEC Identification Number

**C** [Redacted]

**Transaction ID : VTDG0AF0VX**

Amount of Each Disbursement this Period

[Redacted] 17.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **C. BallotReady**

Mailing Address PO Box 220881

City  
Chicago

State  
IL

Zip Code  
60622-0030

Purpose of Disbursement  
Website Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2020

FEC Identification Number

**C** [Redacted]

**Transaction ID : VTDG0AEZT**

Amount of Each Disbursement this Period

[Redacted] 24000.00

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

[Redacted] 24000.00

[Redacted]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Berlin Rosen, Ltd.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		05		2020

Mailing Address 15 Maiden Ln  
Ste 1600City  
New YorkState  
NYZip Code  
10038-5111Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0AF1Bz**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLDG Management Co. Inc.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		26		2020

Mailing Address 417 5th Ave  
Fl 4City  
New YorkState  
NYZip Code  
10016-2239Purpose of Disbursement  
Rent

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0AEXYI**

Amount of Each Disbursement this Period

1670.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Break Something Inc.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		19		2020

Mailing Address 1701 Rhode Island Ave NW  
Fl 5City  
WashingtonState  
DCZip Code  
20036-3040Purpose of Disbursement  
Digital Advertising

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0AF0B**

Amount of Each Disbursement this Period

135000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

151670.65

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Break Something Inc.**Mailing Address 1701 Rhode Island Ave NW  
FI 5City  
WashingtonState  
DCZip Code  
20036-3040Purpose of Disbursement  
Digital Advertising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2020

FEC Identification Number

**C****Transaction ID : VTDG0AF186**

Amount of Each Disbursement this Period

24813.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Break Something Inc.**Mailing Address 1701 Rhode Island Ave NW  
FI 5City  
WashingtonState  
DCZip Code  
20036-3040Purpose of Disbursement  
Digital Advertising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2020

FEC Identification Number

**C****Transaction ID : VTDG0AF187**

Amount of Each Disbursement this Period

51594.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Break Something Inc.**Mailing Address 1701 Rhode Island Ave NW  
FI 5City  
WashingtonState  
DCZip Code  
20036-3040Purpose of Disbursement  
Digital Advertising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2020

FEC Identification Number

**C****Transaction ID : VTDG0AF181**

Amount of Each Disbursement this Period

53811.20

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

130219.07

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 66 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Break Something Inc.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		02		2020

Mailing Address 1701 Rhode Island Ave NW  
FI 5City  
WashingtonState  
DCZip Code  
20036-3040Purpose of Disbursement  
Digital Consulting Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0AF1B**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Break Something Inc.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		03		2020

Mailing Address 1701 Rhode Island Ave NW  
FI 5City  
WashingtonState  
DCZip Code  
20036-3040Purpose of Disbursement  
Digital Advertising

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0AF1BF**

Amount of Each Disbursement this Period

128333.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Break Something Inc.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		06		2020

Mailing Address 1701 Rhode Island Ave NW  
FI 5City  
WashingtonState  
DCZip Code  
20036-3040Purpose of Disbursement  
Photography Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0AF1C**

Amount of Each Disbursement this Period

3500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

146833.32

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Brilliant Corners Research & Strategies**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			19			2020			

Mailing Address 1250 I St NW  
Ste 1003City  
WashingtonState  
DCZip Code  
20005-3939Purpose of Disbursement  
Polling Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Transaction ID : VTDG0AF1C1

Amount of Each Disbursement this Period

48200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Burrell Communications Group, LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2020			

Mailing Address 233 N Michigan Ave  
Ste 2900City  
ChicagoState  
ILZip Code  
60601-5709Purpose of Disbursement  
Media Buy

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Transaction ID : VTDG0AF0BJ

Amount of Each Disbursement this Period

3384515.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Burrell Communications Group, LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2020			

Mailing Address 233 N Michigan Ave  
Ste 2900City  
ChicagoState  
ILZip Code  
60601-5709Purpose of Disbursement  
Media Production

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Transaction ID : VTDG0AF1B

Amount of Each Disbursement this Period

3616.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3436331.92

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Burrell Communications Group, LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	3		2	0	2	0		

Mailing Address 233 N Michigan Ave  
Ste 2900City  
ChicagoState  
ILZip Code  
60601-5709Purpose of Disbursement  
Media Production

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0AF1B1**

Amount of Each Disbursement this Period

2925.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Charmange, Teleah, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		3	0		2	0	2	0		

Mailing Address 446 Dodge St

City  
KentState  
OHZip Code  
44240-3708Purpose of Disbursement  
Volunteer Consulting Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0AEZPJ**

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Charmange, Teleah, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	1		2	0	2	0		

Mailing Address 446 Dodge St

City  
KentState  
OHZip Code  
44240-3708Purpose of Disbursement  
Volunteer Consulting Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0AEZPJ**

Amount of Each Disbursement this Period

1200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4425.65

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Cooper, DaMareo, , ,**

Mailing Address 774 Fuller St

City  
AkronState  
OHZip Code  
44306-2518Purpose of Disbursement  
Strategic Consulting Services & Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	0			2	0	2	0		

FEC Identification Number

**C**

Transaction ID : VTDG0AEZV

Amount of Each Disbursement this Period

3762.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Corporate Innovations, LLC**Mailing Address 911 Robinwood Ave  
Ste FCity  
ColumbusState  
OHZip Code  
43213-1783Purpose of Disbursement  
Website Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	2			2	0	2	0		

FEC Identification Number

**C**

Transaction ID : VTDG0AEZVF

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Deliver Strategies, LLC**

Mailing Address PO Box 100970

City  
ArlingtonState  
VAZip Code  
22210-3970Purpose of Disbursement  
Direct Mail, See Schedule E

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	2	0		

FEC Identification Number

**C**

Transaction ID : VTDG0AF0B

Amount of Each Disbursement this Period

- 40610.85

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 35348.73

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. EveryAction, Inc.**

Mailing Address PO Box 392264

City  
PittsburghState  
PAZip Code  
15251-9264Purpose of Disbursement  
Database Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	6			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VTDG0AEZ7f**

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Garoi Media LLC**

Mailing Address 8901 NW 183rd St

City  
HialeahState  
FLZip Code  
33018-6568Purpose of Disbursement  
Media Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	2			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VTDG0AF1AV**

Amount of Each Disbursement this Period

40000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Greenberg Quinlan Rosner Research**Mailing Address 1101 15th St NW  
Ste 900City  
WashingtonState  
DCZip Code  
20005-5002Purpose of Disbursement  
Polling Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VTDG0AEZT**

Amount of Each Disbursement this Period

19500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

59800.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Hawfish, LLC**Mailing Address 909 3rd Ave  
FI 15City  
New YorkState  
NYZip Code  
10022-4745Purpose of Disbursement  
Digital Advertising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2020			

FEC Identification Number

**C**

Transaction ID : VTDG0AF1G

Amount of Each Disbursement this Period

1382396.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hawfish, LLC**Mailing Address 909 3rd Ave  
FI 15City  
New YorkState  
NYZip Code  
10022-4745Purpose of Disbursement  
Digital Advertising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2020			

FEC Identification Number

**C**

Transaction ID : VTDG0AF1B

Amount of Each Disbursement this Period

250000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hawfish, LLC**Mailing Address 909 3rd Ave  
FI 15City  
New YorkState  
NYZip Code  
10022-4745Purpose of Disbursement  
Digital Production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2020			

FEC Identification Number

**C**

Transaction ID : VTDG0AF1B

Amount of Each Disbursement this Period

95274.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1727670.32

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 72 OF 155

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

## **A. Hawfish, LLC**

Mailing Address 909 3rd Ave  
FI 15

City  
New York

State  
NY

Zip Code  
10022-4745

Purpose of Disbursement  
Digital Advertising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2020

FEC Identification Number

C

Transaction ID : VTDG0AF1G

Amount of Each Disbursement this Period

232193.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Hyper Engine LLC**

Mailing Address 5410 Wilshire Blvd  
FI 10

City  
Los Angeles

State  
CA

Zip Code  
90036-4265

Purpose of Disbursement  
Digital Advertising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2020

FEC Identification Number

C

Transaction ID : VTDG0AF1A1

Amount of Each Disbursement this Period

200000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Jocelyn Harmon**

Mailing Address 903 Dryden St

City  
Silver Spring

State  
MD

Zip Code  
20901-1826

Purpose of Disbursement  
Void of 7/27/20 Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 06 / 2020

FEC Identification Number

C

Transaction ID : VTDG0AEZ7

Amount of Each Disbursement this Period

- 500.00

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

431693.67



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 73 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Jocelyn Harmon**

Mailing Address 903 Dryden St

City  
Silver SpringState  
MDZip Code  
20901-1826Purpose of Disbursement  
Writing & Editing Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		06		2020

FEC Identification Number

**C****Transaction ID : VTDG0AEZ7/**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kerry Mitchell Brown, LLC**Mailing Address 1000 W Washington Blvd  
Unit 146City  
ChicagoState  
ILZip Code  
60607-2148Purpose of Disbursement  
Research Consulting Services & Printing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		23		2020

FEC Identification Number

**C****Transaction ID : VTDG0AF1H/**

Amount of Each Disbursement this Period

5948.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Nubia Scott-Bennett**Mailing Address 1230 Croes Ave  
19-HCity  
BronxState  
NYZip Code  
10472-4536Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2020

FEC Identification Number

**C****Transaction ID : VTDG0AEYJ**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8948.51

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Black PAC

Full Name (Last, First, Middle Initial)

**A. OTG Strategies**

Mailing Address PO Box 69338

City  
Saint LouisState  
MOZip Code  
63169-0338Purpose of Disbursement  
Canvassing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2020			

FEC Identification Number

C

Transaction ID : VTDG0AF1B1

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Pace, Jessica, L, ,**

Mailing Address 7630 Carleton Ave

City  
Saint LouisState  
MOZip Code  
63130-1620Purpose of Disbursement  
Strategic Consulting Services & Webinar Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2020			

FEC Identification Number

C

Transaction ID : VTDG0AEZVC

Amount of Each Disbursement this Period

4990.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Paya Payment Solutions**Mailing Address 12120 Sunset Hills Rd  
Ste 500City  
RestonState  
VAZip Code  
20190-5858Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2020			

FEC Identification Number

C

Transaction ID : VTDG0AEZV

Amount of Each Disbursement this Period

2.56

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

104992.56

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie, LLP**Mailing Address 1201 3rd Ave  
Ste 4900City  
SeattleState  
WAZip Code  
98101-3095Purpose of Disbursement  
Legal & Compliance Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			20	20		

FEC Identification Number

**C** **Transaction ID : VTDG0AEZVI**

Amount of Each Disbursement this Period

 38342.78☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Perkins Coie, LLP**Mailing Address 1201 3rd Ave  
Ste 4900City  
SeattleState  
WAZip Code  
98101-3095Purpose of Disbursement  
Void of 9/17 Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			20	20		

FEC Identification Number

**C** **Transaction ID : VTDG0AEZA1**

Amount of Each Disbursement this Period

 - 2451.34☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Priorities USA Action**Mailing Address 1030 15th St NW  
Ste 950 WestCity  
WashingtonState  
DCZip Code  
20005-1503Purpose of Disbursement  
Media Production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			20	20		

FEC Identification Number

**C** C00495861**Transaction ID : VTDG0AF0B**

Amount of Each Disbursement this Period

 1424.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶ 37315.44**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 76 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Shropshire, LLC**

Mailing Address 380 Summit Ave

City  
Mount VernonState  
NYZip Code  
10552-2206Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2020			

FEC Identification Number

**C****Transaction ID : VTDG0AEWZ**

Amount of Each Disbursement this Period

6250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Shropshire, LLC**

Mailing Address 380 Summit Ave

City  
Mount VernonState  
NYZip Code  
10552-2206Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2020			

FEC Identification Number

**C****Transaction ID : VTDG0AF1CF**

Amount of Each Disbursement this Period

6250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Pivot Group Inc.**Mailing Address 1509 16th St NW  
FI 3City  
WashingtonState  
DCZip Code  
20036-1461Purpose of Disbursement  
Direct Mail, See Schedule E

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2020			

FEC Identification Number

**C****Transaction ID : VTDG0AF0B**

Amount of Each Disbursement this Period

- 27412.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

- 14912.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 77 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. The Pivot Group Inc.**Mailing Address 1509 16th St NW  
FI 3City  
WashingtonState  
DCZip Code  
20036-1461Purpose of Disbursement  
Direct Mail, See Schedule E

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2020			

FEC Identification Number

**C****Transaction ID : VTDG0AF0B!**

Amount of Each Disbursement this Period

- 131609.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Pivot Group Inc.**Mailing Address 1509 16th St NW  
FI 3City  
WashingtonState  
DCZip Code  
20036-1461Purpose of Disbursement  
Printing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2020			

FEC Identification Number

**C****Transaction ID : VTDG0AF1C!**

Amount of Each Disbursement this Period

11089.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Pivot Group Inc.**Mailing Address 1509 16th St NW  
FI 3City  
WashingtonState  
DCZip Code  
20036-1461Purpose of Disbursement  
Printing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2020			

FEC Identification Number

**C****Transaction ID : VTDG0AF1C!**

Amount of Each Disbursement this Period

2421.02

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

- 118099.88

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 155

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. The Pivot Group Inc.**Mailing Address 1509 16th St NW  
FI 3City  
WashingtonState  
DCZip Code  
20036-1461Purpose of Disbursement  
Photography Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			13			20	20				

FEC Identification Number

**C**

Transaction ID : VTDG0AF1C

Amount of Each Disbursement this Period

8150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Pivot Group Inc.**Mailing Address 1509 16th St NW  
FI 3City  
WashingtonState  
DCZip Code  
20036-1461Purpose of Disbursement  
Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			18			20	20				

FEC Identification Number

**C**

Transaction ID : VTDG0AF1C

Amount of Each Disbursement this Period

22052.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Time Warner Cable**

Mailing Address PO Box 11820

City  
NewarkState  
NJZip Code  
07101-8120Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			26			20	20				

FEC Identification Number

**C**

Transaction ID : VTDG0AEZV

Amount of Each Disbursement this Period

83.48

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

30285.86

**TOTAL** This Period (last page this line number only).....▶

6336381.43

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 79 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Carrier, John, C, ,**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		12		2020

Mailing Address 1146 Birch Ave  
Spc 86City  
SeasideState  
CAZip Code  
93955-4446Purpose of Disbursement  
Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : VTDG0AF1Cf**

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

400.00

**TOTAL** This Period (last page this line number only).....▶

400.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 80 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Black PAC**

Full Name (Last, First, Middle Initial)

**A. Burrell Communications Group, LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	3			2	0	2	0		

Mailing Address 233 N Michigan Ave  
Ste 2900City  
ChicagoState  
ILZip Code  
60601-5709Purpose of Disbursement  
Nonfederal Independent Expenditure Media Buy

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** **Transaction ID : VTDG0AF185**

Amount of Each Disbursement this Period

 49999.96☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Burrell Communications Group, LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	2	0		

Mailing Address 233 N Michigan Ave  
Ste 2900City  
ChicagoState  
ILZip Code  
60601-5709Purpose of Disbursement  
Nonfederal Independent Expenditure Media Production

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** **Transaction ID : VTDG0AF18D**

Amount of Each Disbursement this Period

 4357.56☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** 

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶ 54357.52**TOTAL** This Period (last page this line number only).....▶ 54357.52



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 81 OF 155

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Black PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**76 Words**Nature of Debt (Purpose):  
Digital ProductionMailing Address 926 N St NW  
RearCity  
WashingtonState  
DCZip Code  
20001-4485

Outstanding Balance Beginning This Period

17694.16

Transaction ID : VTBHG9HATV8

Amount Incurred This Period

0.00

Payment This Period

17694.16

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**A/B Partners**Nature of Debt (Purpose):  
Digital Consulting ServicesMailing Address 150 Columbia Hts  
Apt. 1 GCity  
BrooklynState  
NYZip Code  
11201-1694

Outstanding Balance Beginning This Period

0.00

Transaction ID : VTBHG9HAV15

Amount Incurred This Period

21000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Burrell Communications Group, LLC**

Nature of Debt (Purpose):

Media Production - Estimated amount of  
\$3,830.00 adjusted to actual amount of  
\$2,992.92.Mailing Address 233 N Michigan Ave  
Ste 2900City  
ChicagoState  
ILZip Code  
60601-5709

Outstanding Balance Beginning This Period

2992.92

Transaction ID : VTBHG9HAT54

Amount Incurred This Period

0.00

Payment This Period

2992.92

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

21000.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 82 OF 155

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Black PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Burrell Communications Group, LLC**

Nature of Debt (Purpose):

Media Production - Estimated amount of \$3,830.00 adjusted to actual amount of \$2,992.25.

Mailing Address 233 N Michigan Ave  
Ste 2900City  
ChicagoState  
ILZip Code  
60601-5709

Outstanding Balance Beginning This Period

2992.25

Transaction ID : VTBHG9HAT62

Amount Incurred This Period

0.00

Payment This Period

2992.25

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Burrell Communications Group, LLC**

Nature of Debt (Purpose):

Media Buy

Mailing Address 233 N Michigan Ave  
Ste 2900City  
ChicagoState  
ILZip Code  
60601-5709

Outstanding Balance Beginning This Period

1000.00

Transaction ID : VTBHG9HAT70

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Burrell Communications Group, LLC**

Nature of Debt (Purpose):

Media Production - Estimated amount of \$3,530.00 to actual amount of \$3,528.14.

Mailing Address 233 N Michigan Ave  
Ste 2900City  
ChicagoState  
ILZip Code  
60601-5709

Outstanding Balance Beginning This Period

3528.14

Transaction ID : VTBHG9HAT96

Amount Incurred This Period

0.00

Payment This Period

3528.14

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 83 OF 155

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Black PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Burrell Communications Group, LLC**

Nature of Debt (Purpose):

Media Production - Estimated amount of \$3,830.00 adjusted to actual amount of \$2,905.09.

Mailing Address 233 N Michigan Ave  
Ste 2900City  
ChicagoState  
ILZip Code  
60601-5709

Outstanding Balance Beginning This Period

2905.09

Transaction ID : VTBHG9HATN1

Amount Incurred This Period

0.00

Payment This Period

2905.09

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Burrell Communications Group, LLC**

Nature of Debt (Purpose):

Media Production - Estimated amount of \$4,830.00 adjusted to actual amount of \$4,132.01.

Mailing Address 233 N Michigan Ave  
Ste 2900City  
ChicagoState  
ILZip Code  
60601-5709

Outstanding Balance Beginning This Period

4132.01

Transaction ID : VTBHG9HATP9

Amount Incurred This Period

0.00

Payment This Period

4132.01

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Hawkfish, LLC**

Nature of Debt (Purpose):

Media Buy &amp; Production - Estimated amount of \$15,103.59 adjusted to actual amount of \$15,935.69

Mailing Address 909 3rd Ave  
Fl 15City  
New YorkState  
NYZip Code  
10022-4745

Outstanding Balance Beginning This Period

15935.69

Transaction ID : VTBHG9HATQ6

Amount Incurred This Period

0.00

Payment This Period

15935.69

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 84 OF 155

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Black PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkfish, LLC

Nature of Debt (Purpose):

Media Buy - Estimated amount of \$61,850.68  
adjusted to actual amount of \$65,293.46.Mailing Address 909 3rd Ave  
FI 15City  
New YorkState  
NYZip Code  
10022-4745

Outstanding Balance Beginning This Period

65293.46

Transaction ID : VTBHG9HATR4

Amount Incurred This Period

0.00

Payment This Period

65293.46

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkfish, LLC

Nature of Debt (Purpose):

Media Buy - Estimated amount of \$65,233.70  
adjusted to actual amount of \$68,880.38.Mailing Address 909 3rd Ave  
FI 15City  
New YorkState  
NYZip Code  
10022-4745

Outstanding Balance Beginning This Period

68880.38

Transaction ID : VTBHG9HATS2

Amount Incurred This Period

0.00

Payment This Period

68880.38

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkfish, LLC

Nature of Debt (Purpose):

Media Buy - Estimated amount of \$83,305.60  
adjusted to actual amount of \$87,859.71.Mailing Address 909 3rd Ave  
FI 15City  
New YorkState  
NYZip Code  
10022-4745

Outstanding Balance Beginning This Period

87859.71

Transaction ID : VTBHG9HATX4

Amount Incurred This Period

0.00

Payment This Period

87859.71

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 85 OF 155

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Black PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkfish, LLC

Nature of Debt (Purpose):

Digital Advertising - Estimated amount of \$88,909.17 adjusted to actual amount of \$88,007.55.

Mailing Address 909 3rd Ave  
FI 15City  
New YorkState  
NYZip Code  
10022-4745

Outstanding Balance Beginning This Period

88007.55

Transaction ID : VTBHG9HATT0

Amount Incurred This Period

0.00

Payment This Period

88007.55

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

21000.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

21000.00

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 86 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00609388       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <b>76 Words</b>			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>10 / 17 / 2020</div> </div>	
Mailing Address 926 N St NW Rear			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1692.73</div>		
City Washington	State DC	Zip Code 20001-4485	<b>Transaction ID : VTDG0AEVYG4</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>10 / 19 / 2020</div> </div>		
Purpose of Expenditure Media Production			Category/ Type		
Name of Federal Candidate: Elliott, Joyce, A., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AR	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">171708.64</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2020		

Full Name of Payee <b>76 Words</b>			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>10 / 16 / 2020</div> </div>	
Mailing Address 926 N St NW Rear			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">17694.16</div>		
City Washington	State DC	Zip Code 20001-4485	<b>Transaction ID : VTDG0AEVYJ0</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>10 / 19 / 2020</div> </div>		
Purpose of Expenditure Digital Production			Category/ Type		
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">16025705.37</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2020		

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">19386.89</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures .....	▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

MM / DD / YYYY

12 / 03 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 87 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <b>76 Words</b>			<input type="checkbox"/> Memo Item		
Mailing Address 926 N St NW Rear			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2020		
City Washington		State DC	Zip Code 20001-4485		
Purpose of Expenditure Digital Production (Previously Reported)			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"></span> 16025705.37			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>76 Words</b>			<input type="checkbox"/> Memo Item		
Mailing Address 926 N St NW Rear			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020		
City Washington		State DC	Zip Code 20001-4485		
Purpose of Expenditure Media Production			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: Timmons-Goodson, Patricia, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 08 State: NC		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"></span> 104872.40			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span> 19446.31		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Shropshire, Adrianne, R., ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 88 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00609388</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>76 Words</b>			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 926 N St NW Rear			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5524.68</div>		
City Washington	State DC	Zip Code 20001-4485	<b>Transaction ID : VTDG0AEX6C8</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Media Production		Category/ Type	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
Name of Federal Candidate: Trump, Donald, J., ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">16025705.37</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2020		

Full Name of Payee <b>76 Words</b>			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 926 N St NW Rear			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5764.90</div>		
City Washington	State DC	Zip Code 20001-4485	<b>Transaction ID : VTDG0AEX6F1</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Media Production		Category/ Type	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
Name of Federal Candidate: Trump, Donald, J., ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">16025705.37</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2020		

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	11289.58
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrianne, R., ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 89 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>					
Full Name of Payee <b>76 Words</b> <input type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">10 / 18 / 2020</span>	
Mailing Address 926 N St NW Rear				Amount <span style="margin-left: 20px;">24463.37</span>	
City Washington		State DC		Zip Code 20001-4485	
Purpose of Expenditure Media Production				Transaction ID : <b>VTDG0AEXQP3</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">10 / 27 / 2020</span>	
Name of Federal Candidate: Trump, Donald, J., ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>76 Words</b> <input type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">10 / 29 / 2020</span>	
Mailing Address 926 N St NW Rear				Amount <span style="margin-left: 20px;">1250.45</span>	
City Washington		State DC		Zip Code 20001-4485	
Purpose of Expenditure Media Production				Transaction ID : <b>VTDG0AEYJX5</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">10 / 29 / 2020</span>	
Name of Federal Candidate: Biden, Joseph, R., , Jr.				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="border: 1px solid black; padding: 5px; width: 200px; text-align: right;">25713.82</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div><b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....</div> <div style="border: 1px solid black; padding: 5px; width: 200px;"></div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div><b>(c) TOTAL</b> Independent Expenditures .....</div> <div style="border: 1px solid black; padding: 5px; width: 200px;"></div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Shropshire, Adrianne, R., ,</u>				Date <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">12 / 03 / 2020</span>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 90 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00609388</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">M M</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">D D</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">Y Y Y Y Y Y</span> </div> </span>	

Full Name of Payee <b>76 Words</b> <div style="text-align: right;"><input type="checkbox"/> Memo Item</div>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">M M</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">D D</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">11</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">02</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">2020</span> </div>
Mailing Address 926 N St NW Rear	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">1452.63</span> </div> <b>Transaction ID : VTDG0AF1BS4</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">M M</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">D D</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">11</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">03</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">2020</span> </div>
City Washington	
State DC	
Zip Code 20001-4485	
Purpose of Expenditure Digital Production	Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div>
Name of Federal Candidate:	
Biden, Joseph, R., , Jr.	<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose         </div> <div>           Office Sought: <input type="checkbox"/> House District: _____  <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____         </div> </div>
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">16025705.37</span> </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>76 Words</b> <div style="text-align: right;"><input type="checkbox"/> Memo Item</div>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">M M</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">D D</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">11</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">02</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">2020</span> </div>
Mailing Address 926 N St NW Rear	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">3109.15</span> </div> <b>Transaction ID : VTDG0AF1BT2</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">M M</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">D D</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">11</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">03</span> <span style="margin-right: 5px;">/</span> <span style="margin-right: 5px;">2020</span> </div>
City Washington	
State DC	
Zip Code 20001-4485	
Purpose of Expenditure Digital Production	Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div>
Name of Federal Candidate:	
Trump, Donald, J., ,	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose         </div> <div>           Office Sought: <input type="checkbox"/> House District: _____  <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____         </div> </div>
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">16025705.37</span> </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">4561.78</span> </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;"> </span> </div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;"> </span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

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2020

Signature

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SE

Transaction ID : VTDG0AF1BT2

Digital Production - Estimated amount of \$3,019.15 adjusted to actual amount of \$3,109.15.

Form/Schedule:

Transaction ID:

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 92 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>76 Words</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> <b>11 / 13 / 2020</b>		
Mailing Address 926 N St NW Rear			Amount <span style="border: 1px solid black; padding: 2px;">1476.23</span>		
City Washington		State DC	Zip Code 20001-4485		Transaction ID : <b>VTDG0AEZZX2</b>
Purpose of Expenditure Digital Production			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> <b>11 / 13 / 2020</b>
Name of Federal Candidate: Warnock, Raphael, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">234411.23</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Run-off Special		
Full Name of Payee <b>76 Words</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> <b>11 / 13 / 2020</b>		
Mailing Address 926 N St NW Rear			Amount <span style="border: 1px solid black; padding: 2px;">1476.23</span>		
City Washington		State DC	Zip Code 20001-4485		Transaction ID : <b>VTDG0AEZZY0</b>
Purpose of Expenditure Digital Production			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> <b>11 / 13 / 2020</b>
Name of Federal Candidate: Ossoff, Jonathan, T., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">234411.23</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">2952.46</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Shropshire, Adrianne, R., ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> <b>12 / 03 / 2020</b>		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 93 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <span style="border: 1px solid black; padding: 2px;">70000.00</span>		
City Washington		State DC	Zip Code 20036-3040		Transaction ID : VTDG0AEWXF2
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020	
Name of Federal Candidate: Cunningham, Cal, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2056452.31</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <span style="border: 1px solid black; padding: 2px;">40000.00</span>		
City Washington		State DC	Zip Code 20036-3040		Transaction ID : VTDG0AEWXXG0
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020	
Name of Federal Candidate: Peters, Gary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3549504.22</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">110000.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 94 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00609388</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Break Something Inc.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>19</span> <span>2020</span> </div>	
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 10px;">80000.00</span> </div>	
City Washington	State DC	Zip Code 20036-3040		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px 10px;"> </span>	Transaction ID : <b>VTDG0AEWXXK4</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>19</span> <span>2020</span> </div>	
Name of Federal Candidate: <span style="float: right;"><input type="checkbox"/> Support</span> Trump, Donald, J., , <span style="float: right;"><input checked="" type="checkbox"/> Oppose</span>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 10px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Break Something Inc.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>19</span> <span>2020</span> </div>	
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 10px;">105000.00</span> </div>	
City Washington	State DC	Zip Code 20036-3040		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px 10px;"> </span>	Transaction ID : <b>VTDG0AEWXM2</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>19</span> <span>2020</span> </div>	
Name of Federal Candidate: <span style="float: right;"><input checked="" type="checkbox"/> Support</span> Biden, Joseph, R., , Jr. <span style="float: right;"><input type="checkbox"/> Oppose</span>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 10px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<span style="margin-left: 10px;">185000.00</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<span style="margin-left: 10px;"> </span>
(c) TOTAL Independent Expenditures .....	▶	<span style="margin-left: 10px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrianne, R., ,

[Electronically Filed]

Date

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2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 95 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388
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 Check if ☐ 24-hour report ☐ 48-hour report ☒ New report Amends report filed on  /  / 

Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <input type="text"/> 25000.00 <b>Transaction ID : VTDG0AEX678</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Washington	State DC	Zip Code 20036-3040	
Purpose of Expenditure Digital Advertising		Category/ Type <input type="text"/>	
Name of Federal Candidate: James, John, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/> 3549504.22	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <input type="text"/> 95000.00 <b>Transaction ID : VTDG0AEX6B0</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Washington	State DC	Zip Code 20036-3040	
Purpose of Expenditure Digital Advertising		Category/ Type <input type="text"/>	
Name of Federal Candidate: Trump, Donald, J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/> 16025705.37	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text"/> 120000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

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 12 / 03 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 96 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <span style="border: 1px solid black; padding: 2px;">25000.00</span>		
City Washington	State DC	Zip Code 20036-3040	Transaction ID : <b>VTDG0AEXBE5</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate: Cunningham, Cal, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate: Cunningham, Cal, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: <u>NC</u>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2056452.31</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>		
City Washington	State DC	Zip Code 20036-3040	Transaction ID : <b>VTDG0AEYB60</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2020		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate: Ossoff, Jonathan, T., , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate: Ossoff, Jonathan, T., ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: <u>GA</u>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">32500.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">45000.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 97 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>		
City Washington	State DC	Zip Code 20036-3040	Transaction ID : <b>VTDG0AEYB78</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2020		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate: Warnock, Raphael, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">32500.00</span>		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>			
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Special General			
Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <span style="border: 1px solid black; padding: 2px;">143811.18</span>		
City Washington	State DC	Zip Code 20036-3040	Transaction ID : <b>VTDG0AEYB36</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2020		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate: Biden, Joseph, R., , Jr. <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____			
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">163811.18</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 98 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 28 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <span style="border: 1px solid black; padding: 2px;">40000.00</span>		
City Washington	State DC	Zip Code 20036-3040	Transaction ID : <b>VTDG0AEYB28</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 30 / 2020		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate: Cunningham, Cal, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2056452.31</span>		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <span style="border-bottom: 1px solid black;"> </span> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <span style="border-bottom: 1px solid black;">NC</span>			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <span style="border-bottom: 1px solid black;"> </span>		Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			
Mailing Address 1701 Rhode Island Ave NW FI 5		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 28 / 2020			
City Washington	State DC	Zip Code 20036-3040	Amount <span style="border: 1px solid black; padding: 2px;">7142.86</span>		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>VTDG0AEYB44</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 30 / 2020		
Name of Federal Candidate: Peters, Gary, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <span style="border-bottom: 1px solid black;"> </span> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <span style="border-bottom: 1px solid black;">MI</span>			
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3549504.22</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <span style="border-bottom: 1px solid black;"> </span>			
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures .....</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures .....</p> </div> <div style="text-align: right;"> <span style="border: 1px solid black; padding: 2px;">47142.86</span>  <span style="border: 1px solid black; padding: 2px;"> </span>  <span style="border: 1px solid black; padding: 2px;"> </span> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Shropshire, Adrianne, R., ,</u>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 99 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00609388</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Break Something Inc.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 28 / 2020</span> </div>	
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">215244.72</span> </div>	
City Washington	State DC	Zip Code 20036-3040		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	<b>Transaction ID : VTDG0AEYB52</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 02 / 2020</span> </div>	
Name of Federal Candidate: <span style="float: right;"><input type="checkbox"/> Support</span> Trump, Donald, J., , <span style="float: right;"><input checked="" type="checkbox"/> Oppose</span>			Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">16025705.37</span> </span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Break Something Inc.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 02 / 2020</span> </div>	
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">153333.34</span> </div>	
City Washington	State DC	Zip Code 20036-3040		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	<b>Transaction ID : VTDG0AF1BM4</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 03 / 2020</span> </div>	
Name of Federal Candidate: <span style="float: right;"><input checked="" type="checkbox"/> Support</span> Biden, Joseph, R., , Jr. <span style="float: right;"><input type="checkbox"/> Oppose</span>			Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">16025705.37</span> </span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<span style="margin-right: 5px;">368578.06</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<span style="margin-right: 5px;"> </span>
(c) TOTAL Independent Expenditures .....	▶	<span style="margin-right: 5px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 100 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>											
Full Name of Payee <input type="checkbox"/> Memo Item <b>Break Something Inc.</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2020							
Mailing Address 1701 Rhode Island Ave NW FI 5				Amount <span style="border: 1px solid black; padding: 2px;">33333.33</span>							
City Washington		State DC	Zip Code 20036-3040	Transaction ID : VTDG0AF1BN2 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2020							
Purpose of Expenditure Digital Advertising				Category/Type <span style="border: 1px solid black; padding: 2px;"></span>							
Name of Federal Candidate: Peters, Gary, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: MI							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3549504.22</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____							
Full Name of Payee <input type="checkbox"/> Memo Item <b>Break Something Inc.</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2020							
Mailing Address 1701 Rhode Island Ave NW FI 5				Amount <span style="border: 1px solid black; padding: 2px;">12500.00</span>							
City Washington		State DC	Zip Code 20036-3040	Transaction ID : VTDG0AF1BP0 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2020							
Purpose of Expenditure Digital Advertising				Category/Type <span style="border: 1px solid black; padding: 2px;"></span>							
Name of Federal Candidate: Warnock, Raphael, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: GA							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">32500.00</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Special General							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width:40%; text-align: right;"><span style="border: 1px solid black; padding: 2px;">45833.33</span></td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;"><span style="border: 1px solid black; padding: 2px;"></span></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures .....</td> <td style="text-align: right;"><span style="border: 1px solid black; padding: 2px;"></span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">45833.33</span>	(b) SUBTOTAL of Unitemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>	(c) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">45833.33</span>										
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>										
(c) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>Shropshire, Adrienne, R., ,</u>				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020							
[Electronically Filed]											

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 101 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 02 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <span style="border: 1px solid black; padding: 2px;">12500.00</span>		
City Washington		State DC	Zip Code 20036-3040		Transaction ID : <b>VTDG0AF1BQ8</b>
Purpose of Expenditure Digital Advertising			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 03 / 2020
Name of Federal Candidate: Ossoff, Jonathan, T., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>GA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">32500.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 13 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <span style="border: 1px solid black; padding: 2px;">5000.00</span>		
City Washington		State DC	Zip Code 20036-3040		Transaction ID : <b>VTDG0AEZZV6</b>
Purpose of Expenditure Digital Advertising			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 13 / 2020
Name of Federal Candidate: Warnock, Raphael, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>GA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">234411.23</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Run-off Special</u>		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">17500.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 102 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 13 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <span style="border: 1px solid black; padding: 2px;">5000.00</span>		
City Washington	State DC	Zip Code 20036-3040	Transaction ID : <b>VTDG0AEZZW4</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 13 / 2020		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: Ossoff, Jonathan, T., ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">234411.23</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
Full Name of Payee <b>Break Something Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 18 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <span style="border: 1px solid black; padding: 2px;">75000.00</span>		
City Washington	State DC	Zip Code 20036-3040	Transaction ID : <b>VTDG0AF09M2</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 18 / 2020		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: Warnock, Raphael, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">234411.23</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Run-off Special		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">80000.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 103 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Break Something Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 18 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount <span style="border: 1px solid black; padding: 2px;">75000.00</span>		
City Washington		State DC	Zip Code 20036-3040		Transaction ID : <b>VTDG0AF09N0</b>
Purpose of Expenditure Digital Advertising			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 18 / 2020
Name of Federal Candidate: Ossoff, Jonathan, T., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>GA</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">234411.23</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
Full Name of Payee <b>Burrell Communications Group, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 09 / 29 / 2020		
Mailing Address 233 N Michigan Ave Ste 2900			Amount <span style="border: 1px solid black; padding: 2px;">1000.00</span>		
City Chicago		State IL	Zip Code 60601-5709		Transaction ID : <b>VTDG0AF0BH2</b>
Purpose of Expenditure Media Buy (Previously Reported )			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 19 / 2020
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">76000.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 104 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> <span>C00609388</span> </div>
---	---

 Check if ☐ 24-hour report ☐ 48-hour report ▶
New report
Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Burrell Communications Group, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">09</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">16</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Mailing Address 233 N Michigan Ave Ste 2900				
City Chicago	State IL	Zip Code 60601-5709	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1;"> </span> <span>2992.92</span> </div>	
Purpose of Expenditure Media Production (Previously Reported)			Transaction ID : <b>VTDG0AF0BN4</b> Date of Disbursement or Obligation <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">23</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Name of Federal Candidate: James, John, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1;"> </span> <span>3549504.22</span> </div>				

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Burrell Communications Group, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">09</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">21</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Mailing Address 233 N Michigan Ave Ste 2900				
City Chicago	State IL	Zip Code 60601-5709	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1;"> </span> <span>2992.25</span> </div>	
Purpose of Expenditure Media Production (Previously Reported)			Transaction ID : <b>VTDG0AF0BP2</b> Date of Disbursement or Obligation <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">23</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Name of Federal Candidate: Tillis, Thom, R., ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1;"> </span> <span>2056452.31</span> </div>				

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<span style="flex-grow: 1;"> </span> <span>5985.17</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<span style="flex-grow: 1;"> </span>
(c) TOTAL Independent Expenditures .....	▶	<span style="flex-grow: 1;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

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2020

Signature



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Form/Schedule: SE

Transaction ID : VTDG0AF0BN4

Media Production - Estimated amount of \$3,830.00 adjusted to actual amount of \$2,992.92.

Form/Schedule: SE

Transaction ID: VTDG0AF0BP2

Media Production - Estimated amount of \$3,830.00 adjusted to actual amount of \$2,992.25.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 106 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Burrell Communications Group, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 09 / 30 / 2020		
Mailing Address 233 N Michigan Ave Ste 2900			Amount <span style="border: 1px solid black; padding: 2px;">3528.14</span>		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : <b>VTDG0AF18M8</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 02 / 2020		
Purpose of Expenditure Media Production (Previously Reported)			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Burrell Communications Group, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 22 / 2020		
Mailing Address 233 N Michigan Ave Ste 2900			Amount <span style="border: 1px solid black; padding: 2px;">5021.12</span>		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : <b>VTDG0AEXEQ2</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 03 / 2020		
Purpose of Expenditure Media Production			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">8549.26</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	

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Form/Schedule: SE

Transaction ID : VTDG0AF18M8

Media Production - Estimated amount of \$3,530.00 to actual amount of \$3,528.14.

Form/Schedule: SE

Transaction ID: VTDG0AEXEQ2

Media Production - Estimated amount of \$6,460.00 adjusted to actual amount of \$5,021.12.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 108 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Burrell Communications Group, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 23 / 2020		
Mailing Address 233 N Michigan Ave Ste 2900			Amount <span style="border: 1px solid black; padding: 2px;">2878.53</span>		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : <b>VTDG0AEXGS1</b>		
Purpose of Expenditure Media Production		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 03 / 2020		
Name of Federal Candidate: Biden, Joseph, R., , Jr.			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Burrell Communications Group, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 26 / 2020		
Mailing Address 233 N Michigan Ave Ste 2900			Amount <span style="border: 1px solid black; padding: 2px;">2841.39</span>		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : <b>VTDG0AEY4V1</b>		
Purpose of Expenditure Media Production		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 03 / 2020		
Name of Federal Candidate: Peters, Gary, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3549504.22</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">5719.92</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	

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Form/Schedule: SE

Transaction ID : VTDG0AEXGS1

Estimated amount of \$4,830.00 to actual amount of \$2,878.53.

Form/Schedule: SE

Transaction ID: VTDG0AEY4V1

Media Production - Estimated amount of \$3,830.00 adjusted to actual amount of \$2,841.39.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 110 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Burrell Communications Group, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 05 / 2020		
Mailing Address 233 N Michigan Ave Ste 2900			Amount <span style="border: 1px solid black; padding: 2px;">2905.09</span>		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AF1BX5 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2020		
Purpose of Expenditure Media Production (Previously Reported)			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: McBath, Lucia, K., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 06 State: GA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">205778.36</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Burrell Communications Group, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2020		
Mailing Address 233 N Michigan Ave Ste 2900			Amount <span style="border: 1px solid black; padding: 2px;">4132.01</span>		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AF1BY3 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2020		
Purpose of Expenditure Media Production (Previously Reported)			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: Cunningham, Cal, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: State: NC		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2056452.31</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">7037.10</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

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Form/Schedule: SE

Transaction ID : VTDG0AF1BX5

Media Production - Estimated amount of \$3,830.00 adjusted to actual amount of \$2,905.09.

Form/Schedule: SE

Transaction ID: VTDG0AF1BY3

Media Production - Estimated amount of \$4,830.00 adjusted to actual amount of \$4,132.01.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 112 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Burrell Communications Group, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020		
Mailing Address 233 N Michigan Ave Ste 2900			Amount <span style="border: 1px solid black; padding: 2px;">2838.65</span>		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AEWXH8		
Purpose of Expenditure Media Production		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 05 / 2020		
Name of Federal Candidate: Biden, Joseph, R., , Jr.			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Burrell Communications Group, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020		
Mailing Address 233 N Michigan Ave Ste 2900			Amount <span style="border: 1px solid black; padding: 2px;">6775.51</span>		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AEWXJ6		
Purpose of Expenditure Media Production		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 05 / 2020		
Name of Federal Candidate: Cunningham, Cal, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2056452.31</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">9614.16</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	



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Form/Schedule: SE  
Transaction ID : VTDG0AEWXH8

Media Production - Estimated amount of \$3,330.00 adjusted to actual amount of \$2,838.65.

Form/Schedule: SE  
Transaction ID: VTDG0AEWXJ6

Media Production - Estimated amount of \$9,660.00 adjusted to actual amount of \$6,775.51.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 114 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Deliver Strategies, LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>PO Box 100970</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020		
City <b>Arlington</b>	State <b>VA</b>	Zip Code <b>22210-3970</b>	Amount <span style="border: 1px solid black; padding: 2px;">40610.85</span>		
Purpose of Expenditure <b>Direct Mail</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Transaction ID : <b>VTDG0AEX603</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020		
Name of Federal Candidate: <b>Biden, Joseph, R., , Jr.</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Deliver Strategies, LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>PO Box 100970</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 15 / 2020		
City <b>Arlington</b>	State <b>VA</b>	Zip Code <b>22210-3970</b>	Amount <span style="border: 1px solid black; padding: 2px;">14651.40</span>		
Purpose of Expenditure <b>Direct Mail</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Transaction ID : <b>VTDG0AEWRK4</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020		
Name of Federal Candidate: <b>McBath, Lucia, K., ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>06</b> <input type="checkbox"/> President State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">205778.36</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">55262.25</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>Shropshire, Adrienne, R., ,</b>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 115 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Deliver Strategies, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 23 / 2020		
Mailing Address PO Box 100970			Amount <span style="border: 1px solid black; padding: 2px;">15075.60</span>		
City Arlington		State VA	Zip Code 22210-3970		Transaction ID : <b>VTDG0AEXFQ3</b>
Purpose of Expenditure Direct Mail			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 26 / 2020
Name of Federal Candidate: McBath, Lucia, K., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 06 State: GA
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">205778.36</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee <b>Garoi Media LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 22 / 2020		
Mailing Address 8901 NW 183rd St			Amount <span style="border: 1px solid black; padding: 2px;">1265.00</span>		
City Hialeah		State FL	Zip Code 33018-6568		Transaction ID : <b>VTDG0AEY2X1</b>
Purpose of Expenditure Media Production			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 29 / 2020
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: State:
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">16025705.37</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">16340.60</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 116 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>GBI Strategies LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 23 / 2020		
Mailing Address 5809 Fifer Dr			Amount <span style="border: 1px solid black; padding: 2px;">242132.50</span>		
City Alexandria	State VA	Zip Code 22303-1916	Transaction ID : <b>VTDG0AEXFR1</b>		
Purpose of Expenditure Canvassing		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020		
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>GBI Strategies LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 23 / 2020		
Mailing Address 5809 Fifer Dr			Amount <span style="border: 1px solid black; padding: 2px;">242132.50</span>		
City Alexandria	State VA	Zip Code 22303-1916	Transaction ID : <b>VTDG0AEXFS9</b>		
Purpose of Expenditure Canvassing		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020		
Name of Federal Candidate: Peters, Gary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MI		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3549504.22</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">484265.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 117 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Ground Game Innovations, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 15 / 2020		
Mailing Address 52 Tuscan Way Ste 202-323			Amount <span style="border: 1px solid black; padding: 2px;">150000.00</span>		
City Saint Augustine	State FL	Zip Code 32092-1850	Transaction ID : <b>VTDG0AF03P6</b>		
Purpose of Expenditure Canvassing		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 16 / 2020		
Name of Federal Candidate: Warnock, Raphael, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">234411.23</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Run-off Special		
Full Name of Payee <b>Ground Game Innovations, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 15 / 2020		
Mailing Address 52 Tuscan Way Ste 202-323			Amount <span style="border: 1px solid black; padding: 2px;">150000.00</span>		
City Saint Augustine	State FL	Zip Code 32092-1850	Transaction ID : <b>VTDG0AF03Q4</b>		
Purpose of Expenditure Canvassing		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 16 / 2020		
Name of Federal Candidate: Ossoff, Jonathan, T., ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">234411.23</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">300000.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Hawkfish, LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 909 3rd Ave FI 15			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 15 / 2020		
City New York		State NY	Zip Code 10022-4745		Amount <span style="border: 1px solid black; padding: 2px;">140675.76</span>
Purpose of Expenditure Digital Advertising & Production			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>VTDG0AEVWP8</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">16025705.37</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee <b>Hawkfish, LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 909 3rd Ave FI 15			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020		
City New York		State NY	Zip Code 10022-4745		Amount <span style="border: 1px solid black; padding: 2px;">157263.50</span>
Purpose of Expenditure Digital Advertising			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>VTDG0AEVYH2</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">16025705.37</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">297939.26</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Shropshire, Adrianne, R., ,</u>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020		[Electronically Filed]

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
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Form/Schedule: SE

Transaction ID : VTDG0AEVWP8

Digital Advertising & Production - Estimated amount of \$115,330.40 adjusted to actual amount of \$140,675.76.

Form/Schedule: SE

Transaction ID: VTDG0AEVYH2

Digital Advertising - Estimated amount of \$178,191.06 adjusted to actual amount of \$157,263.50.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 120 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Hawkfish, LLC</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 17 / 2020		
Mailing Address 909 3rd Ave FI 15			Amount <span style="border: 1px solid black; padding: 2px;">134206.98</span>		
City New York	State NY	Zip Code 10022-4745	Transaction ID : <b>VTDG0AEWF54</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 20 / 2020		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>			
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Hawkfish, LLC</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 18 / 2020		
Mailing Address 909 3rd Ave FI 15			Amount <span style="border: 1px solid black; padding: 2px;">115205.68</span>		
City New York	State NY	Zip Code 10022-4745	Transaction ID : <b>VTDG0AEWQZ6</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 20 / 2020		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>			
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">249412.66</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	



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Form/Schedule: SE

Transaction ID : VTDG0AEWF54

Digital Advertising - Estimated amount of \$116,765.51 adjusted to actual amount of \$134,206.98.

Form/Schedule: SE

Transaction ID: VTDG0AEWQZ6

Digital Advertising - Estimated amount of \$80,671.82 adjusted to actual amount of \$115,205.68.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 122 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Hawkfish, LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 909 3rd Ave FI 15			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020		
City New York		State NY	Zip Code 10022-4745		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Amount <span style="border: 1px solid black; padding: 2px;"></span> 112305.11	
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"></span> 16025705.37			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Hawkfish, LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 909 3rd Ave FI 15			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020		
City New York		State NY	Zip Code 10022-4745		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Amount <span style="border: 1px solid black; padding: 2px;"></span> 5066.60	
Name of Federal Candidate: Trump, Donald, J., ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"></span> 16025705.37			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span> 117371.71		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

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.

Form/Schedule: SE  
Transaction ID : VTDG0AEWYY4

Digital Advertising - Estimated amount of \$103,406.72 adjusted to actual amount of \$112,305.11.

Form/Schedule: SE  
Transaction ID: VTDG0AEWZ09

Digital Advertising - Estimated amount of \$2,591.93 adjusted to actual amount of \$5,066.60.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 124 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Hawkfish, LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 909 3rd Ave FI 15			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020		
City New York		State NY	Zip Code 10022-4745		Amount <span style="border: 1px solid black; padding: 2px;">12892.57</span>
Purpose of Expenditure Digital Advertising			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>VTDG0AEX6D6</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020
Name of Federal Candidate: Trump, Donald, J., ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">16025705.37</span>		
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">16025705.37</span>		
Full Name of Payee <b>Hawkfish, LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 909 3rd Ave FI 15			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020		
City New York		State NY	Zip Code 10022-4745		Amount <span style="border: 1px solid black; padding: 2px;">98101.68</span>
Purpose of Expenditure Digital Advertising			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>VTDG0AEX6E4</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">16025705.37</span>		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">110994.25</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Shropshire, Adrianne, R., ,</u>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020		

[Electronically Filed]

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Form/Schedule: SE

Transaction ID : VTDG0AEX6D6

Digital Adverting - Estimated amount of \$4,381.64 adjusted to actual amount of \$12,892.57.

Form/Schedule: SE

Transaction ID: VTDG0AEX6E4

Digital Advertising - Estimated amount of \$72,616.75 adjusted to actual amount of \$98,101.68.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 126 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Hawkfish, LLC</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2020		
Mailing Address 909 3rd Ave FI 15			Amount <span style="border: 1px solid black; padding: 2px;">584621.08</span>		
City New York	State NY	Zip Code 10022-4745	Transaction ID : <b>VTDG0AEXBH8</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020		
Purpose of Expenditure Digital Advertising & Production		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>			
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Hawkfish, LLC</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2020		
Mailing Address 909 3rd Ave FI 15			Amount <span style="border: 1px solid black; padding: 2px;">291001.91</span>		
City New York	State NY	Zip Code 10022-4745	Transaction ID : <b>VTDG0AEXBJ6</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>			
Name of Federal Candidate: Trump, Donald, J., ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">875622.99</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

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Form/Schedule: SE

Transaction ID : VTDG0AEXBH8

Digital Advertising & Production - Estimated amount of \$1,223,375.61 adjusted to actual amount of \$584,621.08.

Form/Schedule: SE

Transaction ID: VTDG0AEXBJ6

Digital Advertising - Estimated amount of \$268,545.87 adjusted to actual amount of \$291,001.91.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 128 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Hawkfish, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 18 / 2020		
Mailing Address 909 3rd Ave FI 15			Amount <span style="border: 1px solid black; padding: 2px;">4640.82</span>		
City New York	State NY	Zip Code 10022-4745	Transaction ID : <b>VTDG0AEXQS7</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 20 / 2020		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>			
Name of Federal Candidate: Trump, Donald, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Hawkfish, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 10 / 2020		
Mailing Address 909 3rd Ave FI 15			Amount <span style="border: 1px solid black; padding: 2px;">15935.69</span>		
City New York	State NY	Zip Code 10022-4745	Transaction ID : <b>VTDG0AF1FR3</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 20 / 2020		
Purpose of Expenditure Media Buy & Production (Previously Reported)		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>			
Name of Federal Candidate: Biden, Joseph, R., , Jr. <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">20576.51</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrianne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	



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Form/Schedule: SE

Transaction ID : VTDG0AEXQS7

Digital Advertising - Estimated amount of \$4,099.17 adjusted to actual amount of \$4,640.82.

Form/Schedule: SE

Transaction ID: VTDG0AF1FR3

Media Buy & Production - Estimated amount of \$15,103.59 adjusted to actual amount of \$15,935.69.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 130 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00609388</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Hawkfish, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-around;"> <span>10</span> <span>11</span> <span>2020</span> </div>	
Mailing Address 909 3rd Ave Fl 15			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">65293.46</span> </div>	
City New York	State NY	Zip Code 10022-4745		
Purpose of Expenditure Media Buy (Previously Reported )		Category/ Type <span style="border: 1px solid black; padding: 0 10px;"> </span>	Transaction ID : <b>VTDG0AF1FS1</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-around;"> <span>10</span> <span>20</span> <span>2020</span> </div>	
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 0 20px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Hawkfish, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-around;"> <span>10</span> <span>12</span> <span>2020</span> </div>	
Mailing Address 909 3rd Ave Fl 15			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">68880.38</span> </div>	
City New York	State NY	Zip Code 10022-4745		
Purpose of Expenditure Media Buy (Previously Reported )		Category/ Type <span style="border: 1px solid black; padding: 0 10px;"> </span>	Transaction ID : <b>VTDG0AF1FT9</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-around;"> <span>10</span> <span>20</span> <span>2020</span> </div>	
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 0 20px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	134173.84
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

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2020

Signature

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Form/Schedule: SE  
Transaction ID : VTDG0AF1FS1

Media Buy - Estimated amount of \$61,850.68 adjusted to actual amount of \$65,293.46.

Form/Schedule: SE  
Transaction ID: VTDG0AF1FT9

Media Buy - Estimated amount of \$65,233.70 adjusted to actual amount of \$68,880.38.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 132 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Hawfish, LLC</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2020		
Mailing Address 909 3rd Ave FI 15			Amount <span style="border: 1px solid black; padding: 2px;">87859.71</span>		
City New York		State NY	Zip Code 10022-4745		Transaction ID : VTDG0AF1FV7
Purpose of Expenditure Media Buy (Previously Reported )			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Hawfish, LLC</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 14 / 2020		
Mailing Address 909 3rd Ave FI 15			Amount <span style="border: 1px solid black; padding: 2px;">88007.55</span>		
City New York		State NY	Zip Code 10022-4745		Transaction ID : VTDG0AF1FW5
Purpose of Expenditure Digital Advertising (Previously Reported)			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">175867.26</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Shropshire, Adrienne, R., , Signature			[Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020		

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SE  
Transaction ID : VTDG0AF1FV7

Media Buy - Estimated amount of \$83,305.60 adjusted to actual amount of \$87,859.71.

Form/Schedule: SE  
Transaction ID: VTDG0AF1FW5

Digital Advertising - Estimated amount of \$88,909.17 adjusted to actual amount of \$88,007.55.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 134 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00609388</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Hawkfish, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>16</span> <span>2020</span> </div>	
Mailing Address 909 3rd Ave Fl 15			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">1875.18</span> </div>	
City New York	State NY	Zip Code 10022-4745		
Purpose of Expenditure Digital Advertising & Production		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>VTDG0AF1FY1</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>20</span> <span>2020</span> </div>	
Name of Federal Candidate: <span style="float: right;"><input type="checkbox"/> Support</span> Trump, Donald, J., , <span style="float: right;"><input checked="" type="checkbox"/> Oppose</span>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: center;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Hawkfish, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>17</span> <span>2020</span> </div>	
Mailing Address 909 3rd Ave Fl 15			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">2104.77</span> </div>	
City New York	State NY	Zip Code 10022-4745		
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>VTDG0AF1GE7</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>20</span> <span>2020</span> </div>	
Name of Federal Candidate: <span style="float: right;"><input type="checkbox"/> Support</span> Trump, Donald, J., , <span style="float: right;"><input checked="" type="checkbox"/> Oppose</span>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: center;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	3979.95
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12
03
2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 135 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00609388</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Hawfish, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 01 / 2020</span> </div>	
Mailing Address 909 3rd Ave FL 15			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">22254.44</span> </div>	
City New York	State NY	Zip Code 10022-4745		
Purpose of Expenditure Digital Advertising & Production		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>VTDG0AEYZE5</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 02 / 2020</span> </div>	
Name of Federal Candidate: Biden, Joseph, R., , Jr.			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">16025705.37</span> </span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Hawfish, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 01 / 2020</span> </div>	
Mailing Address 909 3rd Ave FL 15			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">51057.89</span> </div>	
City New York	State NY	Zip Code 10022-4745		
Purpose of Expenditure Digital Advertising & Production		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>VTDG0AEYZF3</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 02 / 2020</span> </div>	
Name of Federal Candidate: Trump, Donald, J., ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">16025705.37</span> </span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<span style="margin-right: 5px;">73312.33</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<span style="margin-right: 5px;"> </span>
(c) TOTAL Independent Expenditures .....	▶	<span style="margin-right: 5px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

Signature

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SE  
Transaction ID : VTDG0AEYZE5

Digital Advertising & Production - Estimated amount of \$60,000 adjusted to actual amount of \$22,254.44.

Form/Schedule: SE  
Transaction ID: VTDG0AEYZF3

Digital Advertising & Production - Estimated amount of \$45,265.00 adjusted to actual amount of \$51,057.89.



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 137 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Media Fortitude Partners</b>			<input type="checkbox"/> Memo Item		
Mailing Address 30 Newport Pkwy Apt 2110			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020		
City Jersey City		State NJ	Zip Code 07310-1512		
Purpose of Expenditure Media Buy		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Amount <span style="border: 1px solid black; padding: 2px;"></span> 450000.00	
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"></span> 16025705.37			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Media Fortitude Partners</b>			<input type="checkbox"/> Memo Item		
Mailing Address 30 Newport Pkwy Apt 2110			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2020		
City Jersey City		State NJ	Zip Code 07310-1512		
Purpose of Expenditure Media Buy		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Amount <span style="border: 1px solid black; padding: 2px;"></span> 375000.00	
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"></span> 16025705.37			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span> 825000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Shropshire, Adrienne, R., ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 138 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>	
Full Name of Payee <b>On Cue Analytics LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 76 Saint James Pl Apt 4B			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>		
City Brooklyn		State NY	Zip Code 11238-1249	Amount 500000.00	
Purpose of Expenditure Telephone Calls			Category/ Type	Transaction ID : VTDG0AEYZA4 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>	
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			16025705.37	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>ONYX Communications LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 2046 Westchester Dr			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>		
City Silver Spring		State MD	Zip Code 20902-3557	Amount 150000.00	
Purpose of Expenditure Telephone Calls			Category/ Type	Transaction ID : VTDG0AF1BH1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>	
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			16025705.37	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures .....				650000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures .....					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>			[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 139 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ONYX Communications LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2020		
Mailing Address 2046 Westchester Dr			Amount <span style="border: 1px solid black; padding: 2px;">150000.00</span>		
City Silver Spring	State MD	Zip Code 20902-3557	Transaction ID : <b>VTDG0AF1BJ9</b>		
Purpose of Expenditure Telephone Calls		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2020		
Name of Federal Candidate: Peters, Gary, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>OTG Strategies</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020		
Mailing Address PO Box 69338			Amount <span style="border: 1px solid black; padding: 2px;">475000.00</span>		
City Saint Louis	State MO	Zip Code 63169-0338	Transaction ID : <b>VTDG0AEX611</b>		
Purpose of Expenditure Canvassing		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2020		
Name of Federal Candidate: Biden, Joseph, R., , Jr.			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">625000.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 140 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00609388</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>					
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>OTG Strategies</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address <b>PO Box 69338</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">475000.00</div>	
City <b>Saint Louis</b>		State <b>MO</b>		Zip Code <b>63169-0338</b>	
Purpose of Expenditure <b>Canvassing</b>				Transaction ID : <b>VTDG0AEY7W6</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <span>MM / DD / YYYY</span> </div>	
Name of Federal Candidate: <b>Biden, Joseph, R., , Jr.</b>				Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">16025705.37</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>OTG Strategies</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address <b>PO Box 69338</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">809850.00</div>	
City <b>Saint Louis</b>		State <b>MO</b>		Zip Code <b>63169-0338</b>	
Purpose of Expenditure <b>Canvassing</b>				Transaction ID : <b>VTDG0AEX637</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <span>MM / DD / YYYY</span> </div>	
Name of Federal Candidate: <b>Biden, Joseph, R., , Jr.</b>				Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">16025705.37</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">1284850.00</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Shropshire, Adrianne, R., ,</u>				Date <span style="float: right;">MM / DD / YYYY</span>	
[Electronically Filed]				<div style="display: flex; justify-content: space-around;"> <span>MM / DD / YYYY</span> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 141 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div> <div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div> <div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div> </div>	
Full Name of Payee <b>OTG Strategies</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
Mailing Address <b>PO Box 69338</b>					Amount <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
City <b>Saint Louis</b>		State <b>MO</b>	Zip Code <b>63169-0338</b>		Transaction ID : <b>VTDG0AEX645</b>
Purpose of Expenditure <b>Canvassing</b>			Category/Type <input type="text"/>		Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
Name of Federal Candidate: <b>Peters, Gary, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate
					District: <input type="text"/> State: <b>MI</b>
Calendar Year-To-Date Per Election for Office Sought			<div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee <b>OTG Strategies</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
Mailing Address <b>PO Box 69338</b>					Amount <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
City <b>Saint Louis</b>		State <b>MO</b>	Zip Code <b>63169-0338</b>		Transaction ID : <b>VTDG0AEY7X3</b>
Purpose of Expenditure <b>Canvassing</b>			Category/Type <input type="text"/>		Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
Name of Federal Candidate: <b>Biden, Joseph, R., , Jr.</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate
					District: <input type="text"/> State: <input type="text"/>
Calendar Year-To-Date Per Election for Office Sought			<div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures .....					<div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....					<div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
(c) TOTAL Independent Expenditures .....					<div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>Shropshire, Adrienne, R., ,</b>			[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 142 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee <b>OTG Strategies</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>PO Box 69338</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
City <b>Saint Louis</b>		State <b>MO</b>	Zip Code <b>63169-0338</b>		
Purpose of Expenditure <b>Canvassing</b>			Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>		
Name of Federal Candidate: <b>Cunningham, Cal, ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; width: 150px; height: 20px; text-align: center;">2056452.31</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020		
Full Name of Payee <b>OTG Strategies</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>PO Box 69338</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
City <b>Saint Louis</b>		State <b>MO</b>	Zip Code <b>63169-0338</b>		
Purpose of Expenditure <b>Canvassing</b>			Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>		
Name of Federal Candidate: <b>Biden, Joseph, R., Jr.</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; width: 150px; height: 20px; text-align: center;">16025705.37</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020		
(a) SUBTOTAL of Itemized Independent Expenditures .....				<div style="border: 1px solid black; width: 150px; height: 20px; text-align: center;">1543287.50</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<div style="border: 1px solid black; width: 150px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures .....				<div style="border: 1px solid black; width: 150px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Shropshire, Adrienne, R., ,</u> <div style="text-align: center;">[Electronically Filed]</div>			Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 143 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>OTG Strategies</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>PO Box 69338</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2020		
City <b>Saint Louis</b>		State <b>MO</b>	Zip Code <b>63169-0338</b>		Amount <span style="border: 1px solid black; padding: 2px;">809850.00</span>
Purpose of Expenditure <b>Canvassing</b>			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: <b>Peters, Gary, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3549504.22</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee <b>OTG Strategies</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>PO Box 69338</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2020		
City <b>Saint Louis</b>		State <b>MO</b>	Zip Code <b>63169-0338</b>		Amount <span style="border: 1px solid black; padding: 2px;">100000.00</span>
Purpose of Expenditure <b>Canvassing</b>			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: <b>Biden, Joseph, R., , Jr.</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">909850.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Shropshire, Adrienne, R., ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>OTG Strategies</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>PO Box 69338</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2020		
City <b>Saint Louis</b>	State <b>MO</b>	Zip Code <b>63169-0338</b>	Amount <span style="border: 1px solid black; padding: 2px;">175000.00</span>		
Purpose of Expenditure <b>Canvassing</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Transaction ID : <b>VTDG0AEYZC9</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2020		
Name of Federal Candidate: <b>Biden, Joseph, R., , Jr.</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>OTG Strategies</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>PO Box 69338</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2020		
City <b>Saint Louis</b>	State <b>MO</b>	Zip Code <b>63169-0338</b>	Amount <span style="border: 1px solid black; padding: 2px;">175000.00</span>		
Purpose of Expenditure <b>Canvassing</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Transaction ID : <b>VTDG0AEYZD7</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2020		
Name of Federal Candidate: <b>Peters, Gary, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>MI</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3549504.22</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">350000.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrianne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>OTG Strategies</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>PO Box 69338</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2020		
City <b>Saint Louis</b>		State <b>MO</b>	Zip Code <b>63169-0338</b>		Amount <span style="border: 1px solid black; padding: 2px;">150000.00</span>
Purpose of Expenditure <b>Canvassing</b>			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: <b>Biden, Joseph, R., , Jr.</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>OTG Strategies</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>PO Box 69338</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2020		
City <b>Saint Louis</b>		State <b>MO</b>	Zip Code <b>63169-0338</b>		Amount <span style="border: 1px solid black; padding: 2px;">150000.00</span>
Purpose of Expenditure <b>Canvassing</b>			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: <b>Peters, Gary, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>MI</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3549504.22</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">300000.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020		
[Electronically Filed]					

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 146 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Resonance Campaigns LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 913 Florida Ave NW			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 15 / 2020		
City Washington	State DC	Zip Code 20001-4001	Amount <span style="border: 1px solid black; padding: 2px;">2443.62</span>		
Purpose of Expenditure Direct Mail		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>VTDG0AEVWE5</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020		
Name of Federal Candidate: Underwood, Lauren, , A			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 State: IL		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7330.86</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Resonance Campaigns LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 913 Florida Ave NW			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 15 / 2020		
City Washington	State DC	Zip Code 20001-4001	Amount <span style="border: 1px solid black; padding: 2px;">18836.34</span>		
Purpose of Expenditure Direct Mail		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>VTDG0AEVWF3</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020		
Name of Federal Candidate: Luria, Elaine, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 02 State: VA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">145647.84</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">21279.96</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrianne, R.,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Resonance Campaigns LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 913 Florida Ave NW			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 15 / 2020		
City Washington		State DC	Zip Code 20001-4001		Amount <span style="border: 1px solid black; padding: 2px;">21664.29</span>
Purpose of Expenditure Direct Mail			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>VTDG0AEVWG1</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020
Name of Federal Candidate: Webb, Cameron, B., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">117267.24</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee <b>Resonance Campaigns LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 913 Florida Ave NW			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 15 / 2020		
City Washington		State DC	Zip Code 20001-4001		Amount <span style="border: 1px solid black; padding: 2px;">18325.32</span>
Purpose of Expenditure Direct Mail			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>VTDG0AEVWH9</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020
Name of Federal Candidate: Spanberger, Abigail, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">133787.45</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">39989.61</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrianne, R., ,</i>			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 148 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>The Pivot Group Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 15 / 2020		
Mailing Address 1509 16th St NW FI 3			Amount <span style="border: 1px solid black; padding: 2px;">27412.00</span>		
City Washington	State DC	Zip Code 20036-1461	Transaction ID : <b>VTDG0AEVWK4</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 15 / 2020		
Purpose of Expenditure Direct Mail		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: Elliott, Joyce, A., ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AR		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">171708.64</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>The Pivot Group Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2020		
Mailing Address 1509 16th St NW FI 3			Amount <span style="border: 1px solid black; padding: 2px;">28195.20</span>		
City Washington	State DC	Zip Code 20036-1461	Transaction ID : <b>VTDG0AEX5Y9</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 15 / 2020		
Purpose of Expenditure Direct Mail		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: Elliott, Joyce, A., ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AR		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">171708.64</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">55607.20</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 149 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>The Pivot Group Inc.</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1509 16th St NW FI 3			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020		
City Washington		State DC	Zip Code 20036-1461		
Purpose of Expenditure Direct Mail		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Amount <span style="border: 1px solid black; padding: 2px;"> </span> 131609.90	
Name of Federal Candidate: Peters, Gary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 3549504.22			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020		
Full Name of Payee <b>The Pivot Group Inc.</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1509 16th St NW FI 3			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2020		
City Washington		State DC	Zip Code 20036-1461		
Purpose of Expenditure Direct Mail		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Amount <span style="border: 1px solid black; padding: 2px;"> </span> 131609.90	
Name of Federal Candidate: Peters, Gary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 3549504.22			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶ <span style="border: 1px solid black; padding: 2px;"> </span> 263219.80					
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶ <span style="border: 1px solid black; padding: 2px;"> </span>					
<b>(c) TOTAL</b> Independent Expenditures ..... ▶ <span style="border: 1px solid black; padding: 2px;"> </span>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Shropshire, Adrienne, R., ,</u>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>The Pivot Group Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020		
Mailing Address 1509 16th St NW FI 3			Amount <span style="border: 1px solid black; padding: 2px;">504628.32</span>		
City Washington		State DC	Zip Code 20036-1461		Transaction ID : <b>VTDG0AEXEK0</b>
Purpose of Expenditure Direct Mail			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020
Name of Federal Candidate: Biden, Joseph, R., , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <span style="border-bottom: 1px solid black; width: 50px;"></span>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <span style="border-bottom: 1px solid black; width: 100px;"></span>		
Full Name of Payee <b>The Pivot Group Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020		
Mailing Address 1509 16th St NW FI 3			Amount <span style="border: 1px solid black; padding: 2px;">28195.20</span>		
City Washington		State DC	Zip Code 20036-1461		Transaction ID : <b>VTDG0AEXEM8</b>
Purpose of Expenditure Direct Mail			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020
Name of Federal Candidate: Elliott, Joyce, A., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <span style="border-bottom: 1px solid black; width: 50px;"></span> 02 AR
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171708.64</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <span style="border-bottom: 1px solid black; width: 100px;"></span>		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">532823.52</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>The Pivot Group Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 26 / 2020</b>
Mailing Address 1509 16th St NW FI 3			Amount <span style="border: 1px solid black; padding: 2px;">504628.32</span>
City Washington	State DC	Zip Code 20036-1461	
Purpose of Expenditure Direct Mail		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>VTDG0AEY4Q0</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 20 / 2020</b>
Name of Federal Candidate: Biden, Joseph, R., , Jr.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>The Pivot Group Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 23 / 2020</b>
Mailing Address 1509 16th St NW FI 3			Amount <span style="border: 1px solid black; padding: 2px;">5996.00</span>
City Washington	State DC	Zip Code 20036-1461	
Purpose of Expenditure Printing		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 23 / 2020</b>
Name of Federal Candidate: Biden, Joseph, R., , Jr.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">510624.32</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
**12 / 03 / 2020**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 152 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00609388         </div>										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>														
Full Name of Payee <input type="checkbox"/> Memo Item <b>The Pivot Group Inc.</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020										
Mailing Address 1509 16th St NW FI 3				Amount <span style="border: 1px solid black; padding: 2px;">28195.20</span>										
City Washington		State DC		Zip Code 20036-1461										
Purpose of Expenditure Direct Mail				Transaction ID : <b>VTDG0AEY4R8</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 23 / 2020										
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Elliott, Joyce, A., ,				Office Sought: <input checked="" type="checkbox"/> House    District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: AR										
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171708.64</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶										
Full Name of Payee <input type="checkbox"/> Memo Item <b>The Pivot Group Inc.</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2020										
Mailing Address 1509 16th St NW FI 3				Amount <span style="border: 1px solid black; padding: 2px;">240425.49</span>										
City Washington		State DC		Zip Code 20036-1461										
Purpose of Expenditure Direct Mail				Transaction ID : <b>VTDG0AEY7V8</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 23 / 2020										
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Biden, Joseph, R., , Jr.				Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____										
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16025705.37</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶										
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width:5%; text-align: center;">▶</td> <td style="width:35%; text-align: right;"><span style="border: 1px solid black; padding: 2px;">268620.69</span></td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: center;">▶</td> <td style="text-align: right;"><span style="border: 1px solid black; padding: 2px;"></span></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures .....</td> <td style="text-align: center;">▶</td> <td style="text-align: right;"><span style="border: 1px solid black; padding: 2px;"></span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<span style="border: 1px solid black; padding: 2px;">268620.69</span>	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<span style="border: 1px solid black; padding: 2px;"></span>	(c) TOTAL Independent Expenditures .....	▶	<span style="border: 1px solid black; padding: 2px;"></span>
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<span style="border: 1px solid black; padding: 2px;">268620.69</span>												
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<span style="border: 1px solid black; padding: 2px;"></span>												
(c) TOTAL Independent Expenditures .....	▶	<span style="border: 1px solid black; padding: 2px;"></span>												
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.														
Signature <u>Shropshire, Adrianne, R., ,</u>				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020										

[Electronically Filed]



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 153 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>The Pivot Group Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 26 / 2020		
Mailing Address 1509 16th St NW FI 3			Amount <span style="border: 1px solid black; padding: 2px;">131609.90</span>		
City Washington	State DC	Zip Code 20036-1461	Transaction ID : <b>VTDG0AEY4S5</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 26 / 2020		
Purpose of Expenditure Direct Mail		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: Peters, Gary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">3549504.22</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>The Pivot Group Inc.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 15 / 2020		
Mailing Address 1509 16th St NW FI 3			Amount <span style="border: 1px solid black; padding: 2px;">2935.00</span>		
City Washington	State DC	Zip Code 20036-1461	Transaction ID : <b>VTDG0AF03R0</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 13 / 2020		
Purpose of Expenditure Printing		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: Warnock, Raphael, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">234411.23</span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Run-off Special</u>	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">134544.90</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 154 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>											
Full Name of Payee <input type="checkbox"/> Memo Item <b>The Pivot Group Inc.</b>				Date of Public Distribution/Dissemination <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">11 / 15 / 2020</span>							
Mailing Address 1509 16th St NW Fl 3				Amount <span style="margin-left: 20px;">2935.00</span>							
City Washington		State DC		Zip Code 20036-1461							
Purpose of Expenditure Printing				Transaction ID : <b>VTDG0AF03V4</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">11 / 13 / 2020</span>							
Name of Federal Candidate: Ossoff, Jonathan, T., ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>GA</u>							
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">234411.23</span>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>							
Full Name of Payee <input type="checkbox"/> Memo Item <b>Waterfront Strategies</b>				Date of Public Distribution/Dissemination <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">10 / 15 / 2020</span>							
Mailing Address 3050 K St NW Ste 100				Amount <span style="margin-left: 20px;">36471.06</span>							
City Washington		State DC		Zip Code 20007-5161							
Purpose of Expenditure Media Buy				Transaction ID : <b>VTDG0AEVWM2</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">10 / 15 / 2020</span>							
Name of Federal Candidate: Luria, Elaine, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>							
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">145647.84</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶							
<table style="width: 100%;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width: 40%; text-align: right;">39406.06</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures .....</td> <td></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	39406.06	(b) SUBTOTAL of Unitemized Independent Expenditures.....		(c) TOTAL Independent Expenditures .....	
(a) SUBTOTAL of Itemized Independent Expenditures .....	39406.06										
(b) SUBTOTAL of Unitemized Independent Expenditures.....											
(c) TOTAL Independent Expenditures .....											
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>Shropshire, Adrianne, R., ,</u>				Date <span style="margin-left: 20px;">MM / DD / YYYY</span> <span style="margin-left: 20px;">12 / 03 / 2020</span>							

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 155 OF 155  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Black PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Waterfront Strategies</b>			<input type="checkbox"/> Memo Item		
Mailing Address 3050 K St NW Ste 100			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 15 / 2020		
City Washington		State DC	Zip Code 20007-5161		
Purpose of Expenditure Media Buy		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Amount <span style="border: 1px solid black; padding: 2px;"> </span> 31686.93	
Name of Federal Candidate: Spanberger, Abigail, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 State: VA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 133787.45			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee			<input type="checkbox"/> Memo Item		
Mailing Address			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>		
City		State	Zip Code		
Purpose of Expenditure		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Amount <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate:			<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: State:		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶ <span style="border: 1px solid black; padding: 2px;"> </span> 31686.93					
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶ <span style="border: 1px solid black; padding: 2px;"> </span>					
<b>(c) TOTAL</b> Independent Expenditures ..... ▶ <span style="border: 1px solid black; padding: 2px;"> </span> 14223318.48					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Shropshire, Adrienne, R., ,</u>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020		

[Electronically Filed]